

SECTION 3.4
PARTICIPATING EXTENDED CARE FACILITIES



MEDICARE 1968

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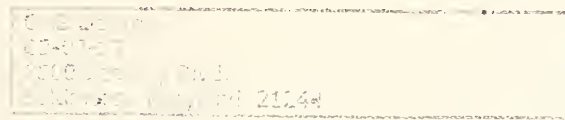
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Foreword

WITH THE enactment of the health insurance program for the aged (Medicare), it became possible to organize a continuing information system to report the use of health care services by older Americans. Since Medicare began, one of the basic tasks has been to process and pay claims for covered medical services submitted by or on behalf of the almost 19.8 million persons entitled to hospital insurance benefits and the 18.8 million persons enrolled for supplementary medical insurance benefits. From this operation come data on the amount, the kind, and the cost of such services used by the aged.

This report is one in a series of publications designed to disseminate such data on a regular basis. It provides detailed statistical information on extended care facilities participating under Medicare. Other reports in the series will present the number and characteristics of participating hospitals, home health agencies, independent laboratories, of the insured population, and the utilization of medical care services. The reports are intended to give a comprehensive account of the amounts reimbursed under the program, the kinds of services paid for, and the variations in utilization and reimbursement by age,

race, and sex of the beneficiary, as well as his place of geographic residence. Such data can provide new insights into the patterns of medical care for persons aged 65 and over. A fuller understanding of present practice can contribute to improved health services not only for the aged but for the general population of the United States as well.

Many individuals in the Social Security Administration have assisted with the development of this series. The preparation of these reports is a major function of the ORS Division of Health Insurance Studies under the supervision of Howard West, director, and Aaron Krute, deputy director, and involving a majority of its staff. Important contributions for the tabulation and presentation of the statistical content of this report were made by Frank L. Kirby, Charles G. Scott, and Harvey L. Engbretson of the Statistical Processing and Procedures Branch of that division. Text preparation was the responsibility of James M. Hatten of the Provider Statistics Branch. Special acknowledgments for publication services are made to the Division of Operating Facilities in the Office of Administration, and for tabulating services to the Division of Health Insurance Statistical Data of the Bureau of Data Processing.

IDA C. MERRIAM,

Assistant Commissioner for Research and Statistics.

September 1971.

Contents

	<i>Page</i>
Foreword	iii
The Statistical System of the Medicare Program	vi
Extended Care Facilities Participating in the Medicare Program	ix
Characteristics of the Extended Care Facilities	x
Conditions of Participation	xiii
Sources of the Data	xvi
Provisions of the Law	xxi
Hospital Insurance Program	xxi
Supplementary Medical Insurance Program	xxii
Eligibility	xxii
Financing the Program	xxiii
Administration of the Program	xxiv

General Tables

Notes	3.4-1
3.4.1 Number of extended care facilities, beds, and beds per 1,000 enrolled population, by type of facility, region, division, and State	3.4-2
3.4.2 Number of extended care facilities, beds, and beds per 1,000 enrolled population, by type of facility, for population size groups of standard metropolitan statistical areas, and for each of 500,000 population or more	3.4-3
3.4.3 Number of extended care facilities by control, type of facility and bed size, region, division, and State	3.4-4
3.4.4 Facilities and services by type of facility, bed size, and number of facilities reporting each service	3.4-39
3.4.5 Facilities and services by control, bed size, and number of facilities reporting each service	3.4-41
3.4.6 Number of extended care facilities and ratios of selected staff by type of facility and bed size	3.4-42

The Statistical System

THIS PUBLICATION is a section of a statistical report series produced from Medicare program records. Presented on a calendar year basis, describing services rendered in the year, the series includes sections on enrollment, characteristics of providers, inpatient care in hospitals and extended care facilities, outpatient hospital services, home health services, physicians' and other medical services, and overall summaries.

The primary objective of these reports is to provide data required to measure and evaluate program operation and effectiveness. Benefit payment operations furnish information about the amount and kind of hospital and medical care services used by persons aged 65 and over, as well as the expenditures for such services. The applications by hospitals, extended care facilities, home health agencies, and independent laboratories to participate in the program provide data on the characteristics of such providers of services. The claim number assigned to each individual serves as the link between the program services utilized and the demographic characteristics of each individual recorded in the health insurance entitlement master file.

The data-collection system has two inherent characteristics that determine the scope, detail, and flexibility of the available data. First, data are collected and maintained on an individual basis so that the beneficiary and his medical experience under the program form the basic unit. Second, records for each bill paid under the program and, for a sample of beneficiaries, records of diagnoses and surgical procedures are maintained on a centralized basis. Except for intermediary operating statistics such as those relating to workloads, costs, and the like, all program statistics are centrally prepared.

THE BASIC RECORDS

The statistical system is based on five related computer-tape records: the health insurance entitlement master file, provider record, hospital insurance (part A) utilization record, medical insurance (part B) payment record, and the record containing information from medical insurance bills for a 5-percent sample of supplementary medical insurance enrollees.

THE HEALTH INSURANCE ENTITLEMENT MASTER FILE

The health insurance entitlement master file identifies each aged person eligible for health insurance benefits and indicates whether he is entitled to hospital benefits, to supplementary medical insurance benefits, or to both of these benefits.

This record is used to create a health insurance card that is sent to each insured person. The card contains the individual's claim number (the number used for OASDI or railroad retirement programs). It indicates the entitlement of the individual for the two parts of the Medicare program.

The entitlement record provides the population data for each part of the program and therefore serves as the base for the computation of a variety of utilization rates, limited only by its demographic content.

PROVIDER RECORD

Every hospital, home health agency, extended care facility, and independent laboratory must apply for participation in the hospital insurance program in order to be reimbursed for services provided. Data included on the application forms have been recorded in the central provider record and are updated as facilities are recertified periodically, as new ones apply for participation, or as some leave the program. When the information in this provider file is combined with utilization data, it serves to relate the characteristics of facilities and agencies that provide care to the kinds and amounts of service used by persons insured under Medicare.

UTILIZATION RECORD FOR HOSPITAL INSURANCE

The administration of the hospital insurance program requires that two items of information be known about each person at the time of his admission to a hospital—his entitlement under the program and the extent to which he has used the benefits available to him under the "benefit period" concept.

When the patient is admitted to a hospital, the admission section of the inpatient hospital admission and billing form is completed by the hospital and forwarded through its intermediary to the Social Security Administration for recording in the central record. As soon as the record is checked, normally in less than 24 hours, the intermediary is informed of the patient's benefit status and of the number of days remaining during the "benefit period."

This information is then forwarded to the hospital. At discharge, the hospital completes the billing section of the form and sends it to the intermediary for payment. When approval for payment has been made, the intermediary forwards the claim to the Social Security Administration for inclusion in the central record.

As part of this process, information on diagnoses and surgical procedures are coded for a 20-percent

of the Medicare Program

sample of beneficiaries based on specific combinations of digits in the health insurance claim number. Copies of admission and billing forms are handled in a comparable manner by home health agencies and extended care facilities. The outpatient billing form is also transmitted to the Social Security Administration for recording in the central record after the bill is approved for payment by the intermediary.

All the information on utilization experience in hospital and extended care facilities that is needed to administer the "benefit period" provision is recorded in the central record. This information includes stays in certain nonparticipating institutions that meet the definition of a hospital or extended care facility under the law, and days of care not covered or reimbursable under the program.

Each admission and billing form contains both the beneficiary's claim number and the provider's identification number. The resulting tape record can be readily matched to the beneficiary files and the provider files. By this process, a statistical tape record is created for the sample of insured persons that contains all the available information needed for tabulation from the three files related to Part A utilization.

PAYMENT FOR MEDICAL INSURANCE

Payment or reimbursement under the SMI program is made only after receipt by the carriers (intermediaries involved in Part B of the Medicare program) of bills having allowed charges exceeding \$50 during a calendar year period.

For the insured population, carriers need to know from a central source that the deductible has been met; thereafter, during the remainder of the calendar year, the only additional information required from the Social Security Administration for reimbursement or payment purposes is whether the person is still enrolled under the SMI program.

For administration and operation of the program, the Social Security Administration must have accurate and complete information on the amounts paid by the carriers for physician services and for other services and supplies under this part of the program. To meet these needs, carriers furnish a payment record consisting of tape, punched card, or other machine-readable record of each bill paid. A "bill" is defined as a request for payment from or on behalf of a beneficiary as the result of services provided by a single physician or supplier.

The payment record also contains selected items of information needed to supply an efficient basis for drawing samples of the bills. These items provide a sampling frame that may be used to draw additional

samples designed to obtain specific information not furnished reliably by the basic sample of enrolled persons under the medical insurance program.

THE MEDICAL INSURANCE SAMPLE

Although the payment record provides a rapid method for summarizing payment data and a sampling frame for efficiently drawing additional samples of bills, it does not provide specific data on diagnoses, procedures, and related charges.

Basic statistics on the utilization of physician and other services covered under the supplementary medical insurance program are derived from bills paid by intermediaries to or on behalf of a continuous 5-percent sample of all enrolled persons. Intermediaries have been given specific combinations of digits of the health insurance claim number to be used in selecting the 5-percent sample, which is a sub-sample of the 20-percent sample used for hospital insurance program data.

Bills are submitted either directly on an SSA request for payment form, or on the SSA form in combination with the physician's billing form. Both methods are designed to provide information on the date and place of each service, the procedure carried out or service provided, the condition treated (diagnosis), and the physician's or supplier's charge for the specific service.

All of the bills of persons in the 5-percent sample to or for whom payment is made under the program, including those used to meet the annual \$50 deductible, are included in the sample and coded. However, data are not available through these procedures for persons in the sample who do not meet the \$50 deductible. Such data are collected by means of the Current Medicare Survey, with data made available in a separate report series.¹

For hospital-based physicians who have authorized the provider to collect the fee for their services, the provider billing for patient services by physicians form is used. This form is completed for each patient. It includes descriptive information on the date and place of each service, the diagnoses, procedures, and the charges. These bills are received centrally for the 5-percent sample of persons enrolled for supplementary medical insurance. Beginning April 1, 1968, it is also possible for the hospital to include payments for radiology and pathology services directly on the hospital bill.

¹ Jack Scharff, "Current Medicare Survey: The Medical Insurance Sample," *Social Security Bulletin*, April 1967.

Extended Care Facilities Participating in the Medicare Program

TITLE XVIII of the Social Security Act, introduced as part of the 1965 amendments, provides health insurance protection for the aged effective July 1, 1966. To implement the law, two separate but complementary programs were established. The first of these, the hospital insurance (HI) program, provides protection against the cost of hospital and related post-hospital care. The second, termed supplementary medical insurance (SMI), provides coverage of physicians' services and a number of other health services not included under the HI program.

An extended care facility is an institution, or a distinct part of an institution, which is primarily engaged in providing skilled nursing care or rehabilitation services and which has in effect a transfer agreement with one or more participating hospitals.¹ Extended care services became a benefit of the HI program on January 1, 1967. These services are intended for patients who had been hospitalized for treatment of a medical condition and who, while no longer requiring the full range of hospital services, still need full-time skilled nursing care in an institutional setting. Benefits are payable for persons who have had at least three consecutive days of hospital care; were admitted on doctor's orders to an extended care facility within 14 days from the date of hospital discharge; and were admitted to the extended care facility for further treatment of the condition for which they were hospitalized.

Facilities certified to provide extended care services under Medicare include skilled nursing facilities, distinct parts or units of hospitals, domiciliary institutions, and rehabilitation centers. The phrase "a distinct part of an institution" means an area that must be physically separated from the rest of the institution and that represents an entire, physically identifiable unit, such as a separate building, floor, wing, or ward.

To participate in the program and be reimbursed for services provided, an extended care facility must meet statutory requirements detailed in the 1965 amendments to the Social Security Act, and be in sub-

stantial compliance with conditions of participation established by the Secretary of Health, Education, and Welfare.² To meet these requirements for participation, each extended care facility must enter into an agreement with the Secretary of Health, Education, and Welfare not to charge beneficiaries for items and services covered by Medicare, except for the allowable deductibles and coinsurance amounts, and to reimburse patients where such charges may occur in error. Each extended care facility must also agree to provide services on a nondiscriminatory basis in accordance with Title VI of the Civil Rights Act of 1964.³

This report presents data on selected characteristics of the extended care facilities that met the conditions for participation in the Medicare program at any time from January 1 to December 31, 1968. Facilities whose participation was terminated prior to December 31, 1968, are included.

During calendar year 1968, 4,886 extended care facilities and approximately 339,000 beds in the United States and outlying areas had been certified for participation in the Medicare program. Although the nursing beds in these institutions were available to the general population, the discussion in this report is limited to the distribution of certified facilities as they are related to the Medicare population.

Between 1967 and 1968, there was a net gain of 233 ECF's, containing some 15,000 beds, comprising a 5-percent increase in both institutions and beds (table A). Most of the change was accounted for by a net increase of 187 skilled nursing homes, and 32 units of hospitals. Similarly, the great majority of the increase occurred among proprietary ECF's with a gain of 171 facilities, while voluntary institutions accounted for 36 ECF's, and 26 were government controlled.

Geographically, all divisions registered net increases between 1967 and 1968, with the increments ranging between 3 percent in New England and 7 percent in the Pacific States.

² For a detailed description of the conditions of participation, see the Code of Federal Regulations, Title 20, Chapter III, Part 405, "Conditions of Participation: Extended Care Facilities" (HIR-11), Social Security Administration, February 1968.

³ See "Conditions of Participation."

¹ For a statutory definition of an extended care facility, see Title XVIII, Section 1861 (j) of the Social Security Act.

Table A.—Number of participating extended care facilities, beds, and percent change, by division, and 1967 and 1968

Division	Facilities			Beds		
	1967	1968	Percent increase	1967	1968	Percent increase
All areas.....	4,653	4,886	5.0	324,062	339,074	4.6
United States.....	4,647	4,879	5.0	323,581	338,570	4.6
New England.....	399	411	3.0	26,223	26,844	2.4
Middle Atlantic.....	532	564	6.0	49,372	52,019	5.4
East North Central.....	735	762	3.7	53,705	55,665	3.6
West North Central.....	430	451	4.9	22,936	23,668	3.2
South Atlantic.....	473	497	5.1	36,599	38,168	4.3
East South Central.....	223	235	5.4	14,240	14,872	4.4
West South Central.....	480	497	3.5	30,025	31,237	4.0
Mountain.....	276	287	4.0	16,385	16,809	2.6
Pacific.....	1,099	1,175	6.9	74,096	79,288	7.0

The average (median) size of all participating ECF's remained the same in both 1967 and 1968—at 60.6 beds per facility. The ratio of beds per nurse (registered and licensed practical nurses combined) was also unchanged between 1967 and 1968—about 7 beds per nurse during each year.

Characteristics of Extended Care Facilities

Type of facility.—Just over four-fifths (81 percent) of all certified extended care facilities were skilled nursing facilities (table B). These contained 85 percent of all certified beds. Units of hospitals accounted for close to 14 percent of all ECF's, but only 10 percent of the beds. Other ECF's (5 percent of the total, with a like proportion of beds) comprised units of domiciliary institutions, rehabilitation centers, and the like.

Table B.—Percentage distribution of participating extended care facilities and beds, by control and type of facility, all areas, 1968

Type of facility	All facilities	Voluntary	Proprietary	State and local
Facilities				
Number.....	4,886	1,076	3,352	458
Total percent.....	100.0	100.0	100.0	100.0
Skilled nursing facility.....	81.1	51.1	96.1	41.9
Unit of hospital.....	13.9	32.8	2.6	51.6
Unit of domiciliary institution.....	4.2	14.0	0.8	6.1
Other.....	0.8	2.1	0.5	0.4
Beds				
Number.....	339,074	60,133	240,103	38,838
Total percent.....	100.0	100.0	100.0	100.0
Skilled nursing facility.....	85.5	62.6	97.0	49.1
Unit of hospital.....	9.7	22.5	1.8	39.0
Unit of domiciliary institution.....	4.2	13.5	0.7	11.7
Other.....	0.6	1.4	0.5	0.2

Over 95 percent of the proprietary ECF's consisted of skilled nursing facilities, which contrasts sharply with comparable percentages of voluntary and government controlled ECF's. Skilled nursing facilities under voluntary sponsorship accounted for about half the total voluntary ECF's, and over 40 percent of those under State and local control. Extended care facility units in hospitals accounted for

over 50 percent of the ECF's under State and local control, compared to around one-third of the voluntary facilities.

Type of control.—Sixty-nine percent of all participating extended care facilities were controlled by proprietary (or profit-making) organizations, 22 percent by voluntary (nongovernment) organizations, and the remainder by State and local governments (table C).

Table C.—Percentage distribution of participating extended care facilities and beds, by type of facility and control, all areas, 1968

Type of control	All facilities	Skilled nursing facility	Unit of hospital	Unit of domiciliary institution	Other
Facilities					
Number.....	4,886	3,963	677	205	41
Total percent.....	100.0	100.0	100.0	100.0	100.0
Voluntary.....	22.0	13.9	52.1	73.2	56.1
Proprietary.....	68.6	85.9	13.0	13.2	39.0
State and local.....	9.4	3.9	34.9	13.6	4.9
Beds					
Number.....	339,074	289,566	32,996	14,343	2,169
Total percent.....	100.0	100.0	100.0	100.0	100.0
Voluntary.....	17.7	13.0	41.0	56.7	38.7
Proprietary.....	70.8	80.4	13.1	11.7	57.1
State and local.....	11.5	6.6	45.9	31.6	4.2

The ownership of ECF's that were units of hospitals paralleled that of participating hospitals. A majority (52 percent) were operated by voluntary organizations, and more than one-third were under the control of State or local governments.

On the average, proprietary extended care facilities were substantially larger than either voluntary or non-Federal government institutions. Only 8 percent of the privately-owned facilities had fewer than 25 beds, compared with 27 percent of the voluntary and 21 percent of the State and local government operated facilities (table D). The median bed size of

Table D.—Number and percentage distribution of participating extended care facilities by control and bed size, all areas, 1968

Bed size	All facilities	Total	Voluntary	Proprietary	State and local
Percentage distribution					
All areas.....	4,886	100.0	100.0	100.0	100.0
Less than 25 beds.....	651	13.3	26.7	8.0	21.2
25-49.....	1,250	25.6	31.0	23.6	27.9
50-74.....	1,285	26.3	20.6	29.2	18.1
75-99.....	770	15.8	8.9	18.8	9.4
100-149.....	647	13.2	7.2	15.6	9.8
150-199.....	170	3.5	3.3	3.4	4.4
200 or more.....	113	2.3	2.3	1.4	9.2

proprietary facilities was 66 beds; that for State and local facilities was 51 beds, while voluntary facilities averaged 44 beds per ECF (table E).

Geographically, proprietary facilities showed some uniformity in their median sizes, while voluntary ECF's displayed more variation, ranging from 51.2

beds in the South Atlantic States to 25.8 in the Mountain States. The largest variation in median bedsize appeared among State and local government-operated ECF's, where the average in the West North Central States was 31 beds, compared to 143 beds in the Middle Atlantic States.

Table E.—Median bed size of participating extended care facilities, by control and division, 1968

Division	All facilities	Voluntary	Proprietary	State and local
All areas.....	60.6	43.8	65.8	51.2
United States.....	60.6	43.8	65.8	51.2
New England.....	58.4	40.2	61.3	67.5
Middle Atlantic.....	70.9	49.7	74.7	143.2
East North Central.....	62.4	49.0	64.7	83.8
West North Central.....	44.3	39.5	57.2	31.0
South Atlantic.....	67.6	51.2	71.6	44.2
East South Central.....	59.2	47.5	64.8	45.4
West South Central.....	58.5	39.6	61.6	41.2
Mountain.....	53.9	25.8	65.8	41.2
Pacific.....	62.1	39.1	67.2	40.8

Bed size.—The percentage of extended care facilities in each geographic division by bed size is shown in table F. The highest proportion of larger institutions was found in the Middle Atlantic States. In contrast, over half of the ECF's in the West North Central States had less than 50 beds.

Table F.—Number and percentage distribution of participating extended care facilities by bed size and division, 1968

Division	All facili- ties	Bed size						
		Less than 25	25- 49	50- 74	75- 99	100- 149	150- 199	200 or more
		Number						
All areas.....	4,886	651	1,250	1,285	770	647	170	113
United States.....	4,879	650	1,247	1,284	769	647	170	112
New England.....	411	46	126	100	65	61	6	7
Middle Atlantic.....	564	59	125	117	73	114	37	39
East North Central.....	762	74	206	203	111	111	35	22
West North Central.....	451	128	126	113	35	35	7	7
South Atlantic.....	497	34	118	137	86	82	27	13
East South Central.....	235	9	82	72	34	31	5	2
West South Central.....	497	78	112	172	48	69	10	8
Mountain.....	287	68	65	67	42	39	5	1
Pacific.....	1,175	154	287	303	275	105	38	13
		Percentage distribution						
All areas.....	100.0	13.3	25.6	26.3	15.8	13.2	3.5	2.3
United States.....	100.0	13.3	25.6	26.3	15.8	13.2	3.5	2.3
New England.....	100.0	11.2	30.7	24.3	15.8	14.8	1.5	1.7
Middle Atlantic.....	100.0	10.5	22.2	20.7	12.9	20.2	6.6	6.9
East North Central.....	100.0	9.7	27.0	26.6	14.6	14.6	4.6	2.9
West North Central.....	100.0	28.3	27.9	25.0	7.8	7.8	1.6	1.6
South Atlantic.....	100.0	6.8	23.8	27.6	17.3	16.5	5.4	2.6
East South Central.....	100.0	3.8	34.9	30.6	14.5	13.2	2.1	0.9
West South Central.....	100.0	15.7	22.5	34.6	9.7	13.9	2.0	1.6
Mountain.....	100.0	23.7	22.7	23.4	14.6	13.6	1.7	0.3
Pacific.....	100.0	13.1	24.4	25.8	23.4	8.9	3.3	1.1

Beds per 1,000 Medicare enrollees.—The 4,886 ECF's participating during 1968 provided about 17 nursing beds per 1,000 persons enrolled for Medicare in that year. The ratios of nursing beds to the aged population ranged from five in Mississippi to 44 in Connecticut (chart 1, table G, and table 3.4.1).

About one-fifth of the States had less than 10 beds per 1,000 insured persons. However, the number of beds available for use by Medicare enrollees depends, in part, on the use of these beds by persons under 65, and by persons 65 and over who have exhausted Medicare benefits.

Table G.—Percentage distribution of nursing beds in participating extended care facilities per 1,000 enrolled population, July 1, 1968

Nursing beds per 1,000 enrolled population	Number of States ¹	Percentage distribution
Total.....	52	100.0
Less than 5.0.....	2	5.8
5.0-9.9.....	9	15.4
10.0-14.9.....	14	26.9
15.0-19.9.....	13	25.0
20.0-24.9.....	7	13.4
25.0-29.9.....	3	5.8
30.0 or more.....	4	7.7

¹ Includes 50 States, District of Columbia, and Puerto Rico.

Relatively more beds per 1,000 population were found in metropolitan counties than in nonmetropolitan counties (table H). Metropolitan counties are those that are included in a standard metropolitan statistical area or a State economic area (see Notes preceding General Tables). These areas provided 20 beds per 1,000 enrolled population, compared with 13 beds per 1,000 enrolled in nonmetropolitan counties. With the exception of the East North Central division, where beds per 1,000 enrolled were about evenly distributed, other geographic divisions had higher ratios in metropolitan than in nonmetropolitan counties.

Table H.—Participating extended care facility beds per 1,000 enrolled population, by division and metropolitan-nonmetropolitan counties, 1968¹

Division	All counties	Metropolitan counties	Nonmetropolitan counties
United States.....	17.4	20.0	13.0
New England.....	21.4	23.4	14.0
Middle Atlantic.....	13.4	14.3	9.9
East North Central.....	14.8	14.7	14.9
West North Central.....	12.4	17.0	9.6
South Atlantic.....	14.1	18.1	9.8
East South Central.....	12.0	17.1	9.8
West South Central.....	17.8	22.2	13.3
Mountain.....	25.6	29.0	22.0
Pacific.....	34.6	35.9	28.9

¹ Based on population enrolled for hospital insurance, July 1, 1968.

Facilities and services.—Table 3.4.4 shows that, in addition to skilled nursing services (which all extended care facilities must provide in order to participate) 88 percent also provided recreational activities, and 76 percent provided physical therapy services. Availability of all services reported in table 3.4.4, other than nursing, generally varies with the size of the facility. When services and facilities were ranked by their relative frequency, the larger institutions generally had the most comprehensive range of services (table J).

CHART 1.—EXTENDED CARE FACILITY BEDS PER 1,000 ENROLLED POPULATION BY STATE, 1968

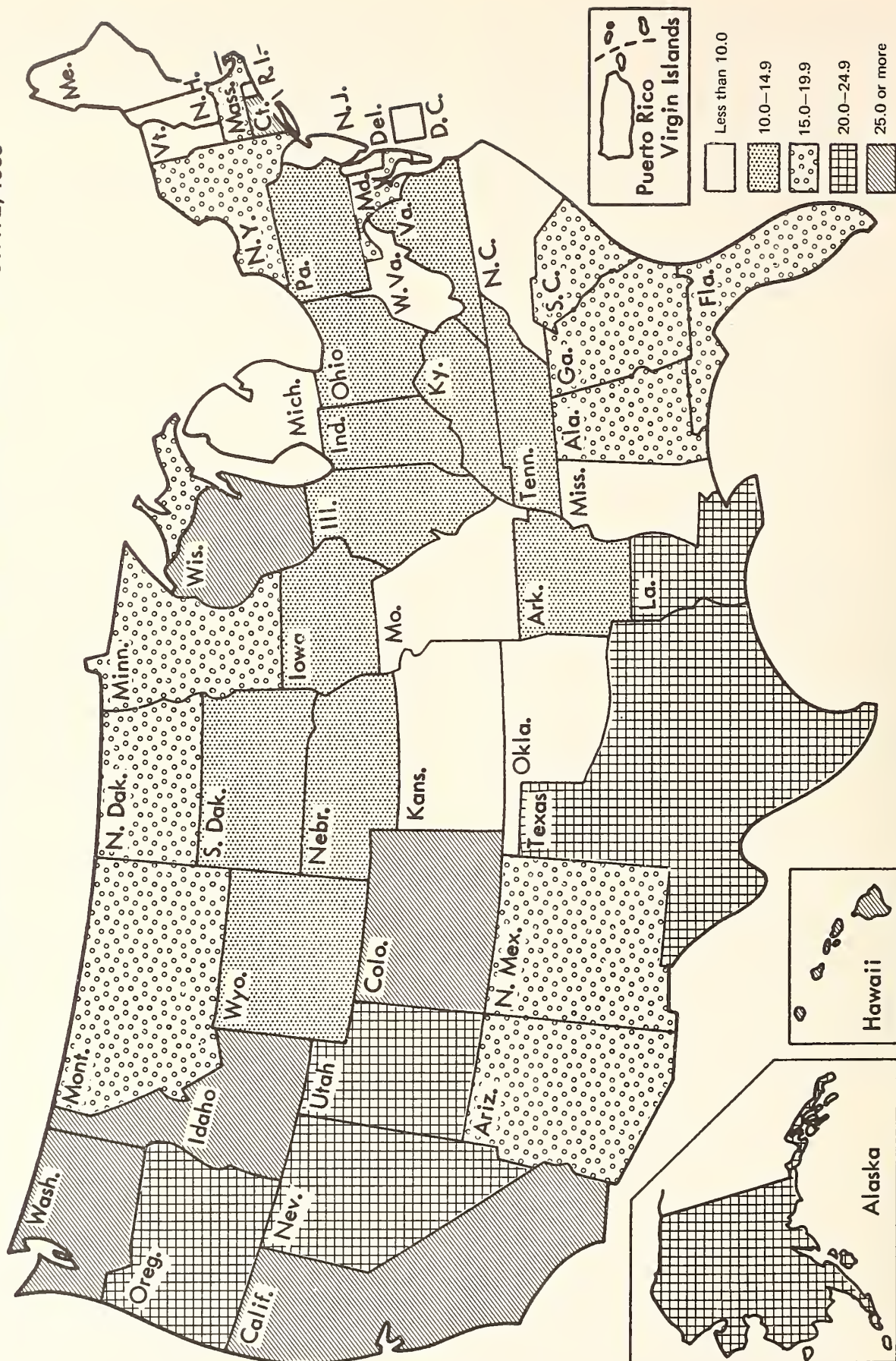


Table J.—Percent of participating extended care facilities reporting specified facilities and services by bed size, all areas, 1968

Facilities and services	All facilities	Bed size						
		Less than 25	25-49	50-74	75-99	100-149	150-199	200 or more
Number.....	4,886	651	1,250	1,285	770	647	170	113
		Percent						
Nursing.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Recreational activities.....	88.1	71.4	87.7	90.1	92.7	92.6	96.5	96.5
Physical therapy.....	76.3	63.9	71.7	76.0	83.0	83.5	90.0	92.9
Examination and treatment room.....	70.9	67.6	64.2	70.0	73.0	77.9	87.1	95.6
Social services.....	62.5	43.3	59.6	64.3	67.1	69.2	82.4	85.0
Pharmacy.....	54.3	53.9	51.4	51.5	54.4	55.3	76.5	80.5
Clinical laboratory.....	52.2	58.1	50.2	47.2	51.7	51.2	74.1	72.6
Dentistry.....	50.3	40.7	48.6	48.2	52.3	53.0	75.3	79.6
X-ray, diagnostic.....	50.2	58.2	48.2	45.7	49.0	47.0	71.2	71.7
Occupational therapy.....	48.2	30.4	43.2	46.2	56.2	59.2	70.0	77.9
Podiatry.....	38.4	24.1	34.8	34.4	44.3	46.7	68.8	72.6
Speech therapy.....	31.3	17.4	28.3	28.7	38.8	37.4	53.5	54.9
Ophthalmology.....	28.2	20.0	26.6	25.8	28.8	32.1	48.8	62.8
Other.....	8.0	6.8	6.0	7.2	7.9	9.4	15.3	29.2

Christian Science sanatoriums.—Christian Science sanatoriums that are operated or listed and certified by the First Church of Christ Scientist, in Boston, may participate in the Medicare program as “extended care facilities.” Payments to Christian Science sanatoriums cover costs of services ordinarily furnished by these sanatoriums that are comparable to those for which payment is made to hospitals in the sense that services in a sanatorium are a substitute for, and not in addition to, medical services that might be furnished a person if his religious beliefs were not contrary to the use of the usual facilities. By the end of 1968, 19 such sanatoriums, distributed in 15 States, were participating as shown below.

State	Number of facilities
Total.....	19
California.....	3
Colorado.....	1
Florida.....	1
Illinois.....	1
Massachusetts.....	1
Michigan.....	1
Missouri.....	2
New Jersey.....	1
New York.....	1
Ohio.....	1
Oregon.....	1
Pennsylvania.....	1
Texas.....	1
Washington.....	2
Wisconsin.....	1

Conditions of Participation

The following material is from the Code of Federal Regulations, Title 20, Chapter III, Conditions of Participation: Extended Care Facilities” (HIR-11), Social Security Administration, February 1968.

Extended care facilities.—In order to participate in the health insurance program, extended care facilities must satisfy requirements specified in the law and in regulations issued by the Secretary of Health, Education, and Welfare. By law, an extended care facility is defined as an institution (or a distinct part of an institution) which has in effect a transfer agreement with one or more participating hospitals,

and is primarily engaged in providing skilled nursing and related services or rehabilitation services to inpatients, who must be under the supervision of a physician. The facility must maintain clinical records for all patients; have policies developed by a group of professional personnel, including one or more physicians and one or more registered professional nurses; have a medical staff member responsible for the execution of such policies; provide 24-hour nursing service; and have at least one registered professional nurse employed full time. Appropriate methods and procedures for the dispensing and administering of drugs and biologicals must be provided, and an acceptable utilization review plan must be in effect. Facilities also must be licensed or approved for licensing by a State or local agency. In addition, the Secretary of Health, Education, and Welfare may prescribe other requirements that he deems necessary to protect the health and safety of the institutions’ patients.

Transfer agreement.—Extended care facilities must have in effect, or must have attempted in good faith to enter into, a transfer agreement with one or more participating hospitals sufficiently close to the facility to make feasible the transfer between them of patients (and medical and other information) whenever such a transfer would be medically appropriate as determined by an attending physician. The transfer agreement must specify the responsibilities each institution assumes in the transfer of patients (and information) between the hospital and the extended care facility. These responsibilities include notifying the other institution promptly of the impending transfer of a patient, arranging for appropriate and safe transportation, and arranging for the care of patients during transfer.

Utilization review plan.—Extended care facilities must have a utilization review plan in order to participate in the Medicare program. The plan must apply to all patients who are Medicare beneficiaries, and must provide for a review, on a sample or other basis, of admissions, length of stay, and the professional services (including drugs and biologicals) fur-

nished with respect to the medical necessity of these services. The plan must also review the most efficient use of available health facilities and services, and each case of extended duration. The definition of what constitutes an "extended duration" case is left to the extended care facility. Most of the facilities have defined them as cases with stays of 30 days or more, although a different number of days may be specified for different classes of cases.

The review should be made by either a staff committee of the institution composed of two or more physicians with or without participation of other professional personnel, or by such a group from outside the institution established jointly by the local medical society and some or all of the hospitals and extended care facilities in the locality. Where such a group does not exist, one must be established in a manner approved by the Secretary.

Title VI of the Civil Rights Act.—In addition to meeting the quality standards established under the health insurance legislation, extended care facilities wishing to participate in the Medicare program must be in compliance with Title VI of the Civil Rights of 1964. In its application to Medicare, the Act requires that all institutions participating in the program provide access to their services and facilities without regard to the race, color, or national origin of a patient; that the ancillary services and facilities be equally available to all people and that the staff be recruited and employed in a nondiscriminatory manner. To meet these requirements, an institution must engage in no discriminating separation, or other distinction on the basis of race, color, or national origin in providing services, facilities, or any other activities that influence the admission, care, or treatment of patients.

Certification process.—Extended care facilities that wish to participate under the Medicare program must apply for and establish their eligibility to do so by meeting the conditions of participation described above. State agencies, primarily health departments, operating under agreement with the Secretary determine whether prospective facilities meet the conditions of participation, and certify to the Department which institutions meet these conditions. A facility that is found to meet the specific statutory requirements and to be in substantial compliance with additional conditions prescribed in Department regulations may sign an agreement with the Secretary to become a participating ECF.

The State agencies first conduct field surveys of each facility to determine the extent to which they are in substantial compliance with the applicable conditions of participation, and undertake periodic re-surveys to determine whether they continue to meet such requirements. They also provide consultative services to those facilities experiencing difficulties in meeting these participation requirements, and identify nonparticipating facilities to determine whether they may affect the benefit period. In addition, they co-

ordinate activities under Medicare with activities under Medicaid. State agencies are reimbursed for the costs of these activities including costs of administrative overhead and staff.

In determining compliance with the conditions of participation, State agencies use a series of standards supplemented by explanatory factors for each prescribed condition. Application of these standards and factors requires a thorough evaluation of the degree to which each facility demonstrates adequate performance.

Facilities with deficiencies in one or more of the conditions of participation may nevertheless be certified if the deficiency does not involve failure to meet a specific statutory requirement; does not interfere with adequate patient care; does not represent a hazard to patient health or safety; and is one which the institution is making reasonable efforts to correct. Consultative services are made available by the State agencies to help providers correct deficiencies.

Level of certification.—Extended care facilities can be accepted for complete participation in the program at the following levels of certification:

1. With no significant deficiencies,
2. With correctible deficiencies,
3. With special certification.

Only 28 percent of all extended care facilities were found to have no significant deficiencies, with an additional 71 percent having correctible deficiencies (table K). Of the major types of extended care facilities, units of hospitals were found to have the largest proportion of facilities with no significant deficiencies. Even so, only 38 percent of this type of ECF had no significant deficiencies.

Table K.—Number and percentage distribution of participating extended care facilities and beds, by type of facility and level of certification, all areas, 1968.

Level of certification	All facilities	Skilled nursing facility	Unit of hospital	Unit of domiciliary institution	Other
Number of facilities					
All areas.....	4,886	3,963	677	205	41
No significant deficiencies.....	1,360	1,011	260	63	26
Correctible deficiencies.....	3,461	2,890	415	141	15
Special certification.....	65	62	2	1	—
Percentage distribution					
All areas.....	100.0	100.0	100.0	100.0	100.0
No significant deficiencies.....	27.8	25.5	38.4	30.7	63.4
Correctible deficiencies.....	70.9	72.9	61.3	68.8	36.6
Special certification.....	1.3	1.6	0.3	0.5	—
Number of beds					
All areas.....	339,074	289,566	32,996	14,343	2,169
No significant deficiencies.....	100,241	81,447	13,412	4,371	1,011
Correctible deficiencies.....	235,065	204,627	19,503	9,777	1,158
Special certification.....	3,768	3,492	81	195	—
Percentage distribution					
All areas.....	100.0	100.0	100.0	100.0	100.0
No significant deficiencies.....	29.6	28.1	40.7	30.5	46.6
Correctible deficiencies.....	69.3	70.7	59.1	68.2	53.4
Special certification.....	1.1	1.2	0.2	1.3	—

Special certification.—Where denial of participation to an extended care facility seriously limits the access of beneficiaries to needed services—because of such factors as isolated location or the absence of sufficient facilities in an area—the facility may, upon recommendation of the State agency, be approved as a provider of services. Such approval is granted only where the facility has no deficiencies that would jeopardize the health and safety of patients, and is making the best use of existing resources to improve its services. Each case is decided individually, and while the degree of compliance may vary, the facility must meet the statutory conditions spelled out in the Social Security Amendments of 1965. In addition, it must meet any other requirements the Secretary may find necessary.

Sixty-five extended care facilities, or 1 percent of the total, were accorded such special certification in 1968 (table L). This represents a significant decrease compared with the number of special certifications in 1967, when 235 facilities (5 percent of the total) fell into this category. The majority of these facilities were upgraded during 1968 and obtained full compliance with all conditions of participation, either with no significant deficiencies or with correctible deficiencies.

Only slight variations were evident in the distribution of these facilities among the geographic divisions. Four percent of all certified ECF's in the East South Central States had special certifications, compared with the West North Central and Pacific States, where there were none. About 10 percent of the certified ECF's in Illinois, Kentucky, and Utah were given special certification.

Recertifications.—The initial certification of extended care facilities with no significant deficiencies is for 1 year. If correctible deficiencies are found on initial survey, a resurvey must be made by the State agency within 9 months or earlier, depending on the nature of the deficiencies.

Extended care facilities with special certifications are resurveyed at least semiannually. If, on resurvey, the provider has not corrected deficiencies and the factor of limited access no longer applies, the provider's participation is terminated.

Termination of participation.—If a provider is judged not to be in compliance, or after a period of participation is no longer in compliance with the conditions of participation, the State agency informs the Social Security Administration of this fact. The Social Security Administration in turn (under powers delegated by the Secretary of Health, Education, and Welfare) acts on the State agency's finding—terminating the provider's contract, if appropriate. If a provider disagrees with SSA decision, a review may be requested, at which time an administrative review of SSA's determination is accomplished.

An agreement may be terminated by either a provider of services or the Secretary of Health, Education, and Welfare. Beneficiaries are protected from an abrupt termination of an agreement by a provider

Table L.—Number of participating extended care facilities and beds with special certification, by division and State, 1968

Division and State	All facilities	Special certification	
		Number	Percent of total
All areas.....	4,886	65	1.3
United States.....	4,879	65	1.3
New England.....	411	5	1.2
Maine.....	25	—	—
New Hampshire.....	12	—	—
Vermont.....	11	1	9.1
Massachusetts.....	156	3	1.9
Rhode Island.....	22	—	—
Connecticut.....	185	1	0.5
Middle Atlantic.....	564	7	1.2
New York.....	256	—	—
New Jersey.....	80	—	—
Pennsylvania.....	228	7	3.1
East North Central.....	762	18	2.4
Ohio.....	182	—	—
Indiana.....	71	—	—
Illinois.....	173	17	9.8
Michigan.....	143	—	—
Wisconsin.....	193	1	0.5
West North Central.....	451	—	—
Minnesota.....	147	—	—
Iowa.....	75	—	—
Missouri.....	75	—	—
North Dakota.....	27	—	—
South Dakota.....	20	—	—
Nebraska.....	34	—	—
Kansas.....	73	—	—
South Atlantic.....	497	7	1.4
Delaware.....	9	—	—
Maryland.....	54	—	—
District of Columbia.....	7	—	—
Virginia.....	52	2	3.8
West Virginia.....	28	—	—
North Carolina.....	47	4	8.5
South Carolina.....	53	—	—
Georgia.....	77	1	1.3
Florida.....	170	—	—
East South Central.....	235	9	3.8
Kentucky.....	60	6	10.0
Tennessee.....	57	1	1.8
Alabama.....	96	2	2.1
Mississippi.....	22	—	—
West South Central.....	497	13	2.6
Arkansas.....	41	—	—
Louisiana.....	118	8	6.8
Oklahoma.....	39	2	5.1
Texas.....	299	3	1.0
Mountain.....	287	6	2.1
Montana.....	33	—	—
Idaho.....	42	—	—
Wyoming.....	10	—	—
Colorado.....	94	3	3.2
New Mexico.....	21	—	—
Arizona.....	43	—	—
Utah.....	29	3	10.3
Nevada.....	15	—	—
Pacific.....	1,175	—	—
Washington.....	176	—	—
Oregon.....	89	—	—
California.....	886	—	—
Alaska.....	7	—	—
Hawaii.....	17	—	—
Outlying areas.....	7	—	—
Guam.....	1	—	—
Puerto Rico.....	6	—	—
Virgin Islands.....	—	—	—
Other outlying areas.....	—	—	—

through a requirement that sufficient prior notice must be given by the provider to the Secretary and to the public. The Secretary may terminate an agreement only after reasonable notice and only if the provider (a) does not comply with the provisions of the agreement or of the law and regulation, (b) is no longer eligible to participate, or (c) fails to provide data needed to determine what benefit amounts are payable or refuses access to financial records for

verification of bills. The Secretary is required to give a provider reasonable notice and an opportunity for a hearing before making a final determination that he does not qualify to participate under the program or before terminating an agreement. The final administrative decision is subject to judicial review.

Benefit period.—Once a beneficiary has exhausted his extended care benefits, he cannot renew them until he ends his benefit period. (See Provisions of the Law section for an explanation of the benefit period.)

A beneficiary's benefit period continues after his discharge from an extended care facility if he is admitted to a nonparticipating institution which can be defined as primarily engaged in providing skilled nursing care or rehabilitative services to inpatients as specified in section 1861 (j) (1) of the Social Security Act. This definition includes institutions functioning primarily for the care and treatment of mental disease or tuberculosis, even though such institutions are precluded from participation as extended care facilities in the program.

Nonparticipating ECF's.—Whether or not an institution meets the definition of an ECF must be made by the State agencies to the Social Security Administration for all institutions in their respective jurisdiction that provide some level of nursing care or rehabilitative services to any of their inpatients. This includes unlicensed as well as licensed nursing homes, rehabilitation centers, facilities that applied for participation and were denied, and the remainder of facilities which have a participating distinct part extended care facility. However, these determinations are not requested from State agencies in the case of hospitals, parts of hospitals, nor entire institutions certified as extended care facilities, since these institutions automatically meet the definition.

To maintain current information regarding the status of nonparticipating facilities, State agencies are asked to inform SSA of all new institutions for nursing or rehabilitation (other than hospitals) even if they are not applying for Medicare participation, as well as any changes in the status of previous determinations.

Sources of the Data

To be reimbursed for services provided, an extended care facility must, as stated above, apply and be accepted for participation in the Medicare program. Data included on the "Extended Care Facility Request to Establish Eligibility" (Form SSA-1516, figure 1) are recorded in the central provider records file and are updated periodically, as new providers apply for participation, or as some leave the program. Upon receipt of these forms in the Social Security Administration's central office, information provided by the facility describing its characteristics is entered into a master provider of services file. All data shown

in the general and text tables of this report are compiled from the information shown on this form and on the "Certification and Transmittal" (Form SSA-1539, figure 2). The latter is processed and transmitted by the contracting State agency upon receipt of the original provider application.

Eligibility forms were completed by all applicants in accordance with instructions and definitions furnished by the Social Security Administration.⁴

TYPES OF EXTENDED CARE FACILITIES

Skilled nursing facilities.—Institutions certified in their entirety to provide skilled nursing care or rehabilitation services under the Medicare program.

Distinct part of skilled nursing facility.—Skilled nursing facilities certified only in part for participation in the program.

Unit of hospital.—Distinct parts of hospitals, such as a ward or wing, in which the primary objective is providing skilled nursing or rehabilitation services.

Units of domiciliary institutions.—Distinct parts of domiciliary institutions in which the primary objective is providing skilled nursing or rehabilitation services.

Other.—Distinct parts of rehabilitation centers in which the primary objective is providing skilled nursing or rehabilitation services.

Christian Science sanatoriums.—May be considered "extended care facilities" with respect to such items and services ordinarily furnished by the institution or additionally stipulated by the Secretary in regulations, if operated or listed and certified by the First Church of Christ Scientist, Boston, Massachusetts.

CONTROL OF EXTENDED CARE FACILITIES

Voluntary—church: Facilities whose governing authority is a nonprofit religious organization.

Voluntary—other: Facilities whose governing authority is a nonprofit organization other than a religious one.

Proprietary: Facilities whose governing authority is an individual, partnership, or profit-making corporation.

Government: Facilities whose governing authority is a unit of government. The unit may be a State, county, or city, or a city and county government jointly.

EXTENDED CARE FACILITIES AND SERVICES

Nursing beds: Includes beds regularly available for use by inpatients receiving skilled nursing care and related services or rehabilitation services under the supervision of at least one physician and one registered nurse, with 24-hour nursing service. For extended care facilities only nursing beds can be cer-

⁴ See "Conditions of Participation for Extended Care Facilities," (HIM-3), Social Security Administration, March 1966.

Figure 1.

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
SOCIAL SECURITY ADMINISTRATION

EXTENDED CARE FACILITY REQUEST TO ESTABLISH ELIGIBILITY IN THE HEALTH INSURANCE FOR THE AGED PROGRAM

Form Approved.
Budget Bureau No. 72-R727**DO NOT WRITE IN THIS SPACE**

ID

S/C

SMSA

DO

DATE CERTIFIED

CERTIFICATION

All extended care facilities desiring to establish their eligibility in the health insurance program should complete this form and return it to the State agency that is handling the certification process. If a return envelope is not provided, the name and address of the State agency may be obtained from the nearest Social Security Administration district office.

SUBMISSION OF THIS FORM AND ESTABLISHING ELIGIBILITY DOES NOT OBLIGATE AN EXTENDED CARE FACILITY TO PARTICIPATE. AN AGREEMENT WILL BE MADE AVAILABLE BY THE SOCIAL SECURITY ADMINISTRATION AT A LATER DATE TO EXTENDED CARE FACILITIES WHO HAVE ESTABLISHED ELIGIBILITY. THERE IS NO COMMITMENT UNTIL THE AGREEMENT IS SIGNED.

I. Identifying Information	A. NAME OF FACILITY		STREET ADDRESS	
	CITY, COUNTY, AND STATE		ZIP CODE	TELEPHONE NUMBER (Including area code)
	NAME OF CHIEF ADMINISTRATIVE OFFICER	TITLE		
	B. NAME AND ADDRESS OF PARENT INSTITUTION (If applicable)			
II. Licensure	1 <input type="checkbox"/> Licensed or approved as _____ _____ by a state or local government agency. Name of agency.		LICENSE EFFECTIVE BEGINNING DATE THRU DATE	
			2 <input type="checkbox"/> No license or approval required	
III. Transfer Agreement	A. Does the facility have a written agreement in effect with any hospital for the transfer of patients and medical and other information between the institutions?			
	1 <input type="checkbox"/> Yes (If "Yes," please attach a copy of the written agreement)		2 <input type="checkbox"/> No (If "No," complete B below)	
IV. Utilization Review Plan	B. Has an attempt been made to enter into such an agreement?			
	1 <input type="checkbox"/> Yes (If "Yes," please attach a description of attempts made to enter into an agreement)		2 <input type="checkbox"/> No	
IV. Utilization Review Plan	Does the extended care facility have a Utilization Review Plan in effect at present?			
	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No			
IV. Utilization Review Plan	(If "Yes," Utilization Review to be made by):			
	1 <input type="checkbox"/> Committee(s) of Extended Care Facility Medical Staff	2 <input type="checkbox"/> Group outside the Extended Care Facility established by Local Medical Society	3 <input type="checkbox"/> Other	
PLEASE ATTACH A COPY OR TENTATIVE DESCRIPTION OF YOUR UTILIZATION REVIEW PLAN, IF AVAILABLE.				

FORM SSA-1516 (3-66)

V. Mental or TB	Is the facility primarily for the care of patients with tuberculosis or mental disease?	
	1 <input type="checkbox"/> Yes	2 <input type="checkbox"/> No
VI. Nursing	A. Does the facility provide 24-hour nursing service?	B. Is at least one registered professional nurse employed full time?
	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No

ITEMS VII THRU XII ARE FOR STATISTICAL PURPOSES

VII. Type of Facility (Check one)	1 <input type="checkbox"/> Skilled Nursing Facility 3 <input type="checkbox"/> Extended Care Unit of Rehabilitation Center 5 <input type="checkbox"/> Other (Specify) _____ 2 <input type="checkbox"/> Extended Care Unit of Hospital 4 <input type="checkbox"/> Extended Care Unit of Domiciliary Institution		
VIII. Type of Control (Check one)	Voluntary Non-Profit 1 <input type="checkbox"/> Church 2 <input type="checkbox"/> Other (Specify) _____ Proprietary 3 <input type="checkbox"/>	Government (Non-Federal) 4 <input type="checkbox"/> State 6 <input type="checkbox"/> City 5 <input type="checkbox"/> County 7 <input type="checkbox"/> City-County Other 8 <input type="checkbox"/> Specify _____	
IX. Facilities and Services Provided (Check all applicable)	01 <input type="checkbox"/> Nursing 06 <input type="checkbox"/> Recreational Activities 11 <input type="checkbox"/> Dentistry* 02 <input type="checkbox"/> Physical Therapy 07 <input type="checkbox"/> Pharmacy 12 <input type="checkbox"/> Podiatry* 03 <input type="checkbox"/> Occupational Therapy 08 <input type="checkbox"/> Clinical Laboratory 13 <input type="checkbox"/> Ophthalmology* 04 <input type="checkbox"/> Speech Therapy 09 <input type="checkbox"/> X-Ray, Diagnostic 14 <input type="checkbox"/> Other (Specify) _____ 05 <input type="checkbox"/> Social Services 10 <input type="checkbox"/> Examination and Treatment Room _____ *Generally not covered under Title XVIII of the Social Security Act.		
X. Physicians	NUMBER OF PHYSICIANS ON THE MEDICAL STAFF		
XI. Number of Employees (Full-Time Equivalents)	A. REGISTERED PROFESSIONAL NURSES	B. LICENSED PRACTICAL NURSES	C. QUALIFIED PHYSICAL THERAPISTS
	D. QUALIFIED OCCUPATIONAL THERAPISTS	E. QUALIFIED SPEECH THERAPISTS	F. LICENSED PHARMACISTS
	G. QUALIFIED SOCIAL WORKERS	H. OTHER SOCIAL WORK PERSONNEL	I. ALL OTHERS
XII. Bed Capacity	A. TOTAL BEDS		B. NUMBER OF NURSING BEDS

SIGNATURE OF AUTHORIZED OFFICIAL

TITLE	DATE

Figure 2.



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
SOCIAL SECURITY ADMINISTRATION

Form Approved.
Budget Bureau No. 72-R725

CERTIFICATION AND TRANSMITTAL

TO BE COMPLETED BY STATE AGENCY

1. NAME AND ADDRESS OF FACILITY		2. TYPE OF FACILITY (a) <input type="checkbox"/> JCAH General Hospital (b) <input type="checkbox"/> Non-JCAH General Hospital (c) <input type="checkbox"/> Psych. Hospital (d) <input type="checkbox"/> TB Hospital (e) <input type="checkbox"/> ECF (f) <input type="checkbox"/> HHA (g) <input type="checkbox"/> HHA (Psych.) (h) <input type="checkbox"/> Independent Lab.																																
3. TO: BHI Regional Representative Regional Office,		4. DATE OF APPLICATION	5. CERTIFICATION <input type="checkbox"/> INITIAL <input type="checkbox"/> RECERTIFICATION	6. STATE																														
7. PURSUANT TO PROVISIONS OF SEC. 1864 OF THE SOCIAL SECURITY ACT, AND UPON CONSIDERATION OF ALL FACTS, THE FACILITY IS CERTIFIED AS: (a) <input type="checkbox"/> In substantial compliance with the conditions of participation (with no significant deficiencies) (b) <input type="checkbox"/> In substantial compliance with the conditions of participation (with correctable deficiencies) (c) <input type="checkbox"/> Meeting the conditions for special certification (limited access) (d) <input type="checkbox"/> Not (or no longer) in compliance with conditions of participation																																		
8. SUPPLEMENTAL INFORMATION ON HOSPITALS AND ECF'S NOT IN COMPLIANCE (a) <input type="checkbox"/> Facility is in conformance with 1861 (e) (1) (Definition of hospital) (b) <input type="checkbox"/> Facility is in conformance with 1861 (j) (1) (Definition of ECF) (c) <input type="checkbox"/> Hospital is in conformance with 1861 (e) (1-5) and (7) (Eligible for emergency services)																																		
9. <input type="checkbox"/> JCAH ACCREDITATION VERIFIED	10. RECOMM. RE-SURVEY DATE	11. CONDITIONS OF PARTICIPATION WITH MAJOR DEFICIENCIES (Circle) (Complete when items 7b, 7c, or 7d are checked) <table style="width: 100%; text-align: center;"> <tr> <td>I</td><td>II</td><td>III</td><td>IV</td><td>V</td><td>VI</td><td>VII</td><td>VIII</td><td>IX</td><td>X</td><td>XI</td><td>XII</td><td>XIII</td><td>XIV</td><td>XV</td> </tr> <tr> <td>XVI</td><td>XVII</td><td>XVIII</td><td>XIX</td><td>XX</td><td>XXI</td><td>XXII</td><td>XXIII</td><td>XXIV</td><td>XXV</td><td colspan="5"></td> </tr> </table>			I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	XIII	XIV	XV	XVI	XVII	XVIII	XIX	XX	XXI	XXII	XXIII	XXIV	XXV					
I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	XIII	XIV	XV																				
XVI	XVII	XVIII	XIX	XX	XXI	XXII	XXIII	XXIV	XXV																									
12. EVIDENCE AND REASONING (Include results of consultation)																																		

☐ CONT. ON ATTACHED SHEET

13. PREPARED BY	14. DATE	15. REVIEWED BY	16. DATE
TITLE		TITLE	

TO BE COMPLETED BY REGIONAL OFFICE

17. DETERMINATION OF ELIGIBILITY (a) <input type="checkbox"/> Facility is eligible to participate (b) <input type="checkbox"/> Facility is not eligible to participate		18. FACILITY IS IN COMPLIANCE WITH TITLE VI OF CIVIL RIGHTS ACT <input type="checkbox"/>
19. REGIONAL OFFICE REVIEW ACTION (a) <input type="checkbox"/> Approved SA Certification No change (b) <input type="checkbox"/> Following consultation with SA, original certification of compliance changed to non-compliance (c) <input type="checkbox"/> Following consultation with SA, original certification of non-compliance changed to compliance		
20. REMARKS		

21. PHS REVIEWER (where applicable)	22. DATE	23. DETERMINATION APPROVED	24. DATE

TO: BHI
 Division of Methods and Procedures
 Baltimore, Maryland 21235

FORM SSA-1539 (2-66)

tified for participation in the program. Beds available for patients receiving custodial care, which is designed to assist an individual in meeting his activities of daily living, and does not require the attention of medical or allied health personnel, cannot be certified for participation.

Nursing: Organized facilities and 24-hour nursing services provided by qualified nursing personnel of sufficient numbers and categories to meet the nursing needs of patients, with at least one registered professional nurse employed full time and responsible for the total nursing service.

Physical therapy department: Organized facilities and services at the institution or by arrangement with an appropriate institution for the provision of physical therapy services prescribed by physicians and administered by or under the direction of a qualified physical therapist.

Occupational therapy department: Organized facilities and services at the institution or by arrangement with an appropriate institution for the provision of occupational therapy services prescribed by physicians and administered by or under the direction of a qualified occupational therapist.

Speech therapy services: Organized facilities and services at the institution or by arrangement with an appropriate institution for the provision of speech therapy services prescribed by physicians and administered by or under the direction of a qualified speech therapist.

Social service departments: Organized facilities and services at the institution or by arrangement with an appropriate institution for the provision of

social services under the direction of a qualified social worker.

Recreational activities: Organized facilities and services suited to the needs and interest of patients to encourage restoration to self-care and resumption of normal activities, directed by an individual who has training or experience in group activities, or has available consultation from a qualified recreational therapist or group activity leader.

Pharmacy: Facilities and services at the institution or by arrangement with an appropriate institution which provide appropriate methods for the obtaining, dispensing, and administering of drugs and biologicals, developed with the advice of a staff or consultative pharmacist, or a pharmaceutical advisory committee which includes one or more licensed pharmacists.

Clinical laboratory: Laboratory responsible for tests and procedures in the fields of microbiology, serology, clinical chemistry, hematology, and immunohematology.

X-ray, diagnostic: Use of radiographic and fluoroscopic equipment for the recognition and identification of internal conditions in a patient.

Examination or treatment room: An organized unit of an institution with facilities and personnel to aid physicians in the diagnosis and treatment of patients through the performance of diagnostic or therapeutic procedures.

Other services or facilities: May include dentistry, podiatry, and ophthalmology which are not covered by Title XVIII of the Social Security Act.

Provisions of the Law

THE HEALTH insurance program for the aged, commonly called Medicare, was enacted on July 30, 1965, as Title XVIII of the Social Security Act, and became effective on July 1, 1966. The program, a part of the 1965 amendments (Public Law 89-97), makes available two separate but coordinated insurance coverages—hospital insurance, covering nearly all persons aged 65 and over, and supplementary medical insurance, covering those persons in this age group who enroll voluntarily and pay the premium. Changes in the program, effective in 1968, were incorporated in the 1967 amendments to the Social Security Act (Public Law 90-248) enacted on January 2, 1968.

Hospital Insurance Program

The hospital insurance program (Part A of Medicare) pays for a large portion of the costs of hospital and related post-hospital services. It is financed on a self-supporting basis through a tax on a portion of current earnings, paid by employees, employers, and self-employed persons. The proceeds of this tax are placed in the Hospital Insurance Trust Fund, from which reimbursements for benefits and administrative expenses incurred under the program are paid. The trust fund is reimbursed from general tax revenues for the costs of providing coverages for persons who qualify for hospital insurance but who are not eligible for monthly social security or railroad retirement benefits.

BENEFITS

Inpatient hospital benefits.—The program covers the cost of covered services in a participating hospital for up to 90 days in a “benefit period” (a period beginning with the first day of hospitalization and ending 60 days after discharge from a hospital or a skilled nursing home). Full payment is made for the first 60 days of hospitalization after a deductible of \$40 has been paid. For each of the remaining 30 days in the benefit period, the patient pays a coinsurance amount of \$10 a day. Each hospital insurance beneficiary also has a “lifetime reserve” of 60 additional days, subject to a copayment of \$20 a day. These additional days can be used at the patient’s option

whenever the 90 days covered in a benefit period are exhausted. The program also provides benefits for emergency services rendered in a nonparticipating hospital. Each nonparticipating hospital providing emergency services elects whether to bill the program or to charge its patients directly. If they bill the program, they are reimbursed on the basis of reasonable costs of covered services rendered. If they bill the patient, he pays the bill and submits the itemized bill to SSA for reimbursement. The reimbursement paid is 60 percent of reasonable charges for room and board and 80 percent of the charges for ancillary services.

Inpatient tuberculosis and psychiatric hospital services are also covered. However, there is a lifetime limit of 190 days of care in a psychiatric hospital. Where an individual is a patient in a participating psychiatric hospital at the time he becomes entitled to hospital insurance, the number of days he was such an inpatient in the 150-day period immediately prior to his eligibility are deducted from his days of entitlement in that benefit period, but not from the lifetime limitation.

Covered hospital services include hospital room and board in accommodations containing from two to four beds, nursing services except for private-duty nursing, drugs and biologicals, and all those services ordinarily furnished by a hospital to its inpatients. Coverage under the hospital insurance program does not include the services of physicians (including radiologists, anesthesiologists, pathologists, and psychiatrists) except for those services provided by interns or residents in training under approved teaching programs in a hospital.

The cost of the first three pints of blood (or equivalent amounts of packed red blood cells) furnished a patient during a benefit period is a deductible amount unless the patient arranges for replacement. Charges for any additional blood are covered under the program.

Outpatient hospital diagnostic benefits.—These benefits cover the costs of tests and related services that are ordinarily furnished by a participating hospital to its outpatients for the purpose of diagnostic study. Such services are covered subject to a \$20 deductible and 20-percent coinsurance for services furnished the beneficiary by the same hospital during a

20-day period. Beginning April 1, 1968, all outpatient hospital benefits are covered by the Supplementary Medical Insurance program and are no longer subject to these limitations.

Post-hospital home health care benefits.—These benefits cover the cost of visiting nurse services and related home health services for as many as 100 visits for up to a year following the patient's most recent discharge from a hospital or participating extended care facility, provided he has been confined for at least 3 consecutive days in a hospital. A home health plan must be developed by a physician and implemented within 14 days after the patient's discharge from the hospital or extended care facility. The home health care must be for further treatment of a condition for which he received services as an inpatient in the hospital or extended care facility.

Post-hospital extended care facility benefits.—The program pays for the reasonable cost of all covered inpatient services in participating extended care facilities for up to 100 days of such care in any benefit period, following discharge from a hospital after a stay of 3 consecutive days or more, and admission to an extended care facility within 14 days of discharge. Full payment is made for the first 20 days. For each of the remaining 80 days, the patient pays a coinsurance amount of \$5 a day.

Supplementary Medical Insurance Program

The supplementary medical insurance program (Part B of Medicare) provides coverage of physicians' services, outpatient hospital services (beginning April 1, 1968), additional home health services, other medical services and supplies, and outpatient physical therapy services furnished by qualified providers (beginning July 1, 1968). Individuals 65 years of age and over may enroll in the program regardless of whether they are eligible for social security retirement benefits. Monthly premiums paid by the individual are matched by the Federal Government and paid into the Supplementary Medical Insurance Trust Fund, which reimburses carriers for benefits and administrative expenses incurred under the program.

BENEFITS

The SMI program pays for 80 percent of the allowed charges for covered physician services and other medical services (or 80 percent of reasonable cost) after the patient has met a deductible of \$50 during a calendar year. However, payment for outpatient psychiatric physician services is limited to the lesser of \$250 or 50 percent of the allowed charges in any year after the \$50 deductible has been met. The sum and percentage are derived from the statutory provision which permits an incurred expense for out-of-hospital treatment of mental illness of only \$312.50 or 62.5 percent of actual expenses in a calendar year. Since only 80 percent of allowed

charges can be reimbursed the effective maximum becomes \$250.

To preclude the possibility of having to meet a deductible twice in a short period of time, a "carry-over" provision is applied. Accordingly, covered expenses that are incurred in the last quarter of the year and counted toward the deductible in that year are also credited toward the deductible for the following year. However, after March 31, 1968, the provisions concerning the deductible and the coinsurance do not apply to the services of radiologists and pathologists furnished to hospital inpatients.

Covered under the program are such benefits as physicians' services, including home, hospital and office visits; services and supplies, including drugs and biologicals that cannot be self-administered, that are furnished as a part of a physician's professional service, most commonly in his office, and either rendered without charge or included in the physician's bills; diagnostic X-ray tests, diagnostic laboratory tests, and other diagnostic tests; X-ray; radium, and radioactive isotope therapy, including materials and the services of technicians; surgical dressings, splints, casts, and other devices used for reduction of fractures and dislocations; purchase or rental of durable medical equipment, including iron lungs, oxygen tents, hospital beds, and wheelchairs used in the patient's home (including an institution used as his home); ambulance service in cases where the use of other methods of transportation is contraindicated by the individual's condition; prosthetic devices (other than dental) that replace all or part of an internal organ, including replacement of such devices; leg, arm, back, and neck braces, and artificial legs, arms, eyes, including replacement if required because of a change in the patient's physical condition; and 100 home health visits during a calendar year—these visits being independent of those provided under the hospital insurance program.

Also covered are hospital services, incident to physicians' services rendered to outpatients, including services beginning April 1, 1968 which were previously covered under the hospital insurance program, and outpatient physical therapy services beginning July 1, 1968.

Eligibility

The hospital insurance program.—Almost all persons aged 65 and over are eligible for benefits under the hospital insurance program. Included are those persons in this age group who are entitled to monthly social security cash benefits or payments from the railroad retirement system, regardless of whether they have applied for these cash benefits. During the period under consideration, a person could apply for hospital insurance protection even though he did not qualify for either social security cash benefits or a railroad retirement annuity if he had attained age 65 before 1968, or after 1967 with not less than 3

quarters of social security coverage, whenever acquired, for each calendar year elapsing after 1966 and before the year in which he had attained age 65. However, hospital insurance could not go into effect until the individual attained age 65. These classes of individuals were "deemed insured" under a special transitional provision.

Federal employees who retired from the Federal service after July 1, 1960, and who had the opportunity to be covered under the Federal Employees Health Benefits act of 1959, are ineligible for hospital insurance benefits under the transitional provisions. Also ineligible are aliens with less than 5 years of continuous residence in the United States, and those convicted of crimes against the security of the United States.

Hospital insurance protection can be retroactive for as many as 12 months before the month an individual files his application for entitlement. For example, an individual may apply 11 months after he attains age 65 and still be entitled to benefits from the month he attained age 65.

Supplementary medical insurance.—Persons entitled to benefits under the hospital insurance program (Part A), retired Federal employees, and persons not eligible for hospital insurance under the transitional provisions may voluntarily participate in the SMI program.

Enrollment.—Individuals may enroll in the SMI program only during specified periods—the initial and the general enrollment periods. The initial enrollment period begins with the third month preceding the one in which an individual attains age 65 and ends 3 months after the month of attainment, a total period of 7 months. If he enrolls during the 3 months prior to the month in which he attains age 65, his coverage is effective with the month in which he attains age 65; if he enrolls during the month he attains age 65, his coverage begins the following month; if he enrolls in any of the 3 months after he attains age 65, his coverage begins from 2 to 3 months after enrollment, depending on how long he waited before enrolling.

A general enrollment period was set between October 1, 1967 and March 31, 1968 for those who did not enroll in the initial enrollment period. A person who enrolls during a general enrollment period may receive benefits starting on the first of July following the general enrollment period. An eligible individual must enroll within 3 years after the close of his initial enrollment period or within 3 years after termination of prior enrollment.

An initial general enrollment period was set up at the beginning of the program for people who had attained age 65 before March 1, 1966. This enrollment period began September 1, 1965, and ended on May 31, 1966, for coverage to begin on July 1, 1966.

A State may enroll otherwise eligible individuals who receive cash payments under public assistance programs if the State requests such a State-Federal

enrollment agreement to be established and pays the necessary premiums.

Enrollment terminates with the beginning of the month following the month of death. Up to April 1, 1968, railroad retirement beneficiaries and individuals entitled to monthly cash social security benefits could terminate their enrollment voluntarily by notifying the Social Security Administration in writing during a general enrollment period of the desire to withdraw from the program. Under the 1967 amendments effective April 1, 1968, beneficiaries may give notice of withdrawal at any time and their coverage will be terminated at the close of the following calendar quarter. Other enrolled persons may terminate their coverage by withholding payment of premiums or by notifying the Social Security Administration in writing of the desire to withdraw from the program. The enrollee is provided a 90-day grace period for the payment of overdue premiums after which coverage is automatically terminated. An individual who previously has terminated his enrollment may re-enroll only in a general enrollment period beginning within 3 years of the date his previous enrollment had terminated. Re-enrollment, however, is allowed only once.

Financing the Program

Hospital Insurance.—The hospital insurance program is financed on a long-range, self-supporting basis through a separate schedule of increasing tax rates on the first \$7,800 of earnings in employment covered under the Social Security Act. The same tax rate applies to employees, employers, and self-employed persons. This rate was 0.35 percent in 1966, 0.50 percent for 1967, 0.60 for 1968-1972, and is scheduled to increase until it is 0.90 percent in 1987 and thereafter. The proceeds of this tax and that collected from the railroad retirement system are placed in a Hospital Insurance Trust Fund from which reimbursements for all benefits and administrative expenses incurred under the hospital insurance program are paid. The Hospital Insurance Trust Fund is reimbursed from general tax revenues for the cost of providing coverage for the almost 2½ million persons who qualify for hospital insurance but who are not entitled to monthly social security or railroad retirement benefits, that is, those "deemed insured."

Supplementary Medical Insurance.—Premiums are paid into the Federal Supplementary Medical Insurance Trust Fund by those persons enrolled for supplementary medical insurance, (or on their behalf) and a matching amount is paid from general revenues by the Federal government.

The premiums of persons receiving social security cash benefits, railroad retirement, or Federal civil service annuities are deducted from their monthly benefit checks. Persons not receiving monthly benefits are billed quarterly for premiums by the Social

Security Administration or Railroad Retirement Board and have a 90-day grace period in which to make payment. Premiums may be paid for as long as a year in advance, and for individuals financially unable to make quarterly payments, arrangements can be made for monthly payments.

The premium rate of the supplementary medical insurance program may be adjusted annually if medical costs rise. The law requires that the rate be set at an amount that will generate income to the fund sufficient to cover benefit payments and administrative costs incurred during the year. The monthly premium was \$3 for each month beginning with July 1966 and ending with March 1968; and \$4 a month beginning April 1968.

Under the 1967 amendments, States are permitted to enter into agreements with the Secretary, based on a request made before January 1, 1970, to buy in—that is, to pay the medical insurance premiums—for public assistance recipients aged 65 or over who were receiving money payments under an approved public assistance plan and for all aged persons eligible to receive medical assistance under an approved Title XIX plan.

Administration of the Program

Hospital Insurance.—Under the hospital insurance plan, groups or associations of providers, on behalf of their members, may nominate a national, State, or other public or private agency or organization to serve as intermediary in the claims process. A member of an association is free, however to receive payment from an approved intermediary other than its association's nominee, if approved by the Secretary and agreeable to the intermediary selected. In addition, a provider may deal directly with the Social Security Administration.

The Secretary may enter into an agreement with a nominated organization if he finds this to be consistent with effective and efficient administration of the hospital insurance program. The intermediary makes payments to providers for covered items and services on the basis of reasonable cost determinations and assists in the application of safeguards against unnecessary utilization of covered services. The agreement may also call for (1) furnishing consultative services to assist providers to establish and maintain necessary fiscal records and otherwise qualify as providers of services, (2) serving as a center for communicating with providers, and (3) making audits of provider records. Generally speaking, the Social Security Administration utilizes the services of the hospital insurance intermediary in making payments for home health and outpatient hospital services covered under medical insurance.

Payment may be made for a beneficiary for covered emergency inpatient hospital services or covered emergency outpatient hospital services where the hospital is not a participating facility and agrees not

to charge the beneficiary for covered services. Such a hospital may be outside the United States if it is more accessible than the nearest hospital in the United States adequately equipped to treat the patient.

Requests for payment for covered services must be signed by the beneficiary (or someone for him, if he is unable to do so). Payments are made on the basis of reasonable costs for these services to participating providers of services, that is, hospitals, extended-care facilities, and home health agencies, who have been certified for participation.

In some instances, hospitals may bill for physician services rendered to inpatients. In these cases, interim payment is made by the Part A intermediary. Depending on the nature of the billing, funds are transferred from the SMI trust fund to the HI trust fund to cover the cost of these services, or funds are paid directly from the SMI trust fund.

The intermediary selected by the provider reviews the claims for payment and pays the provider. Actual payment is made on the basis of an interim rate established between the provider and the intermediary. Final settlement based on each provider's operating year is made on the basis of a cost report submitted by the provider, and subject to an independent audit.

No payments can be made to Federal providers of services except for emergency services, unless this provider serves as a community institution. In addition, payment cannot be made to a provider for those services it is obligated to render at public expense under Federal law or contract.

Supplementary Medical Insurance.—Under the medical insurance program, the Secretary of Health, Education, and Welfare may enter into contracts with carriers for the performance of specified administrative functions. The carriers' principal function is to determine whether charges are allowable (reasonable) and to make payment.

The carrier selected by the Secretary of Health, Education, and Welfare to serve as an intermediary determines the allowed charges for bills submitted for each medical care service covered by the program and pays 80 percent of this amount after the \$50 deductible has been met.

The allowed charge for the service may be paid to the patient, or the patient may assign the bill for collection to the physician or other supplier of the service, if he is willing to accept assignment. In the former situation, the patient submits an itemized bill to the carrier and is reimbursed; in the latter, the physician or other supplier submits the bill and is reimbursed. When the payment is made directly to the physician (or supplier) on assignment, the allowed or reasonable charge determined by the carrier is the total charge. In both situations, the patient is responsible for the first \$50 of the charges for covered services he receives during the year and the amount of the bill over 80 percent of the allowed charges.

The law instructs the carrier to consider the following criteria in determining the "allowed" charge:

- (1) the customary charge for the service generally made by the physician or other person furnishing such services; and
- (2) the prevailing charge in the locality by other physicians and suppliers for similar services.

The law also specifies that the "allowed" charge cannot be higher than the charge applicable for the similar service rendered under comparable circumstances to the carriers' own policy holders or subscribers.

Carriers also have the authority and responsibility to determine, in a given case, whether a claim is for a covered service and to deny claims for noncovered or excluded items or services. In addition, carriers are to assist in the application of safeguards against unnecessary utilization of services furnished eligible individuals.

Most services covered by the medical insurance program are rendered on a fee-for-service basis.

However, services furnished under group practice prepayment plans are normally rendered in return for predetermined premium payments. In recognition of the need for special adaptation of the Medicare payment procedure for services rendered by group practice prepayment plans, the law provides that an organization which furnishes medical and other health services (or arranges for their availability) on a prepayment basis, may elect to be paid 80 percent of the reasonable cost of services in lieu of 80 percent of the allowed charge for such services.

The 1967 amendments to the Social Security Act introduced a time limit on filing of claims. For bills incurred in the supplementary medical insurance portion of the program after March 1968, claims must be filed no later than the close of the calendar year following the year in which the services are furnished. For services provided during the last 3 months of the calendar year, bills may be submitted through the end of the second year following.

General Tables

Notes

Type of facility.—See page x.

Type of control.—See page x.

Facilities and services.—See page xi.

Geographic classifications.—Based on the address of the facility.

All areas: Consists of the United States, Guam, Puerto Rico, Virgin Islands, and other outlying areas.

United States: Consists of the 50 States, and the District of Columbia.

Other outlying areas: Consists of American Samoa, the Canal Zone, Canton Island, Caroline Islands, Mariana Islands, Marshall Islands, Midway Islands, and Wake Island.

Standard metropolitan statistical areas.—Listed as of the end of 1966 by the Office of Statistical Standards, Bureau of the Budget, in the publication

Standard Metropolitan Statistical Areas (1967). Each metropolitan area is an integrated economic and social unit with a recognized large population nucleus. Each standard metropolitan statistical area must contain at least one city of at least 50,000 inhabitants. The area includes the county of such a central city and adjacent counties that are found to be metropolitan in character and economically and socially integrated with the county of the central city.

In New England an SMSA consists of towns and cities, rather than counties. However, the address of the participating facility is coded only for State and county. Therefore, for New England, the SMSA was replaced by the metropolitan State economic area, which is defined in terms of whole counties.

Symbols

Quantity zero	-----	—
Quantity more than 0 but less than 0.05	----	0.0

Table 3.4.1 NUMBER OF EXTENDED CARE FACILITIES, BEDS, AND BEDS PER 1,000 ENROLLED POPULATION, BY TYPE OF FACILITY, REGION, DIVISION, AND STATE

[See NOTES preceding General Tables]

Region, division, and State	All facilities			Skilled nursing facility ¹		Unit of hospital		Unit of domiciliary institution		Other	
	Number	Beds	Beds per 1,000 enrolled population	Number	Beds	Number	Beds	Number	Beds	Number	Beds
Total	4 886	339 074	17.2	3 963	289 566	677	32 996	205	14 343	41	2 169
United States	4 879	338 570	17.4	3 962	289 491	671	32 567	205	14 343	41	2 169
Northeastern States	975	78 863	15.4	822	65 528	72	5 861	74	6 870	7	604
North Central States	1 213	79 333	14.0	907	65 264	238	10 051	57	3 653	11	365
South	1 229	84 277	14.8	1 060	75 916	125	5 680	37	2 211	7	470
West	1 462	96 097	32.6	1 173	82 783	236	10 975	37	1 609	16	730
The Northeastern States:											
New England	411	26 844	21.4	376	24 731	22	1 515	12	430	1	168
Middle Atlantic	564	52 019	13.4	446	40 797	50	4 346	62	6 440	6	436
The North Central States:											
East North Central	762	55 665	14.8	617	47 409	95	5 220	43	2 782	7	254
West North Central	451	23 668	12.4	290	17 855	143	4 831	14	871	4	111
The South:											
South Atlantic	497	38 168	14.1	435	34 840	43	2 180	17	1 070	2	78
East South Central	235	14 872	12.0	208	13 482	23	1 167	4	223	-	-
West South Central	497	31 237	17.8	417	27 594	59	2 333	16	918	5	392
The West:											
Mountain	287	16 809	25.6	203	13 865	70	2 300	11	452	3	192
Pacific	1 175	79 288	34.6	970	68 918	166	8 675	26	1 157	13	538
New England:											
Maine	25	972	8.3	18	803	7	169	-	-	-	-
New Hampshire	12	501	6.3	8	435	3	40	1	26	-	-
Vermont	11	447	9.2	11	447	-	-	-	-	-	-
Massachusetts	156	11 562	18.4	144	10 015	9	1 251	2	128	1	168
Rhode Island	22	1 087	10.6	19	976	2	36	1	75	-	-
Connecticut	185	12 275	43.8	176	12 055	1	19	8	201	-	-
Middle Atlantic:											
New York	256	29 404	15.1	207	22 554	22	3 132	25	3 636	2	82
New Jersey	80	6 150	9.1	66	5 105	6	459	5	242	3	344
Pennsylvania	228	16 465	13.1	173	13 138	22	755	32	2 562	1	10
East North Central:											
Ohio	182	13 222	13.4	157	11 801	15	861	9	545	1	15
Indiana	71	5 507	11.3	63	5 162	6	281	2	64	-	-
Illinois	173	11 268	10.4	135	9 500	18	798	19	957	1	13
Michigan	143	12 855	17.2	111	10 033	20	1 656	9	989	3	177
Wisconsin	193	12 813	27.5	151	10 913	36	1 624	4	227	2	49
West North Central:											
Minnesota	147	7 704	18.9	98	5 688	45	1 858	4	158	-	-
Iowa	75	3 903	11.1	52	2 849	18	813	3	155	2	86
Missouri	75	5 020	9.1	57	4 520	16	475	-	-	2	25
North Dakota	27	1 265	19.1	18	1 020	6	72	3	173	-	-
South Dakota	20	976	12.1	14	801	5	112	1	63	-	-
Nebraska	34	2 618	14.4	21	1 486	10	810	3	322	-	-
Kansas	73	2 182	8.3	30	1 491	43	691	-	-	-	-
South Atlantic:											
Delaware	9	539	12.4	6	386	1	60	2	93	-	-
Maryland	54	5 119	18.4	50	4 679	1	104	3	336	-	-
District of Columbia	7	1 641	24.3	5	1 417	1	64	1	160	-	-
Virginia	52	3 773	10.8	48	3 664	4	109	-	-	-	-
West Virginia	28	1 238	6.3	20	885	5	232	2	61	1	60
North Carolina	47	3 221	8.1	37	2 813	7	282	3	126	-	-
South Carolina	53	3 351	18.1	51	3 254	2	97	-	-	-	-
Georgia	77	6 012	17.1	70	5 688	7	324	-	-	-	-
Florida	170	13 274	15.8	148	12 054	15	908	6	294	1	18
East South Central:											
Kentucky	60	3 847	11.5	52	3 568	7	229	1	50	-	-
Tennessee	57	3 876	10.4	44	2 939	11	794	2	143	-	-
Alabama	96	6 130	19.5	94	6 033	1	67	1	30	-	-
Mississippi	22	1 019	4.7	18	942	4	77	-	-	-	-
West South Central:											
Arkansas	41	2 498	10.9	27	1 924	12	446	2	128	-	-
Louisiana	118	7 125	24.3	111	6 667	5	238	2	220	-	-
Oklahoma	39	1 547	5.4	24	1 070	9	212	4	97	2	168
Texas	299	20 067	21.3	255	17 933	33	1 437	8	473	3	224
Mountain:											
Montana	33	1 331	19.5	14	827	14	326	5	178	-	-
Idaho	42	2 640	39.7	31	2 003	5	229	4	240	2	168
Wyoming	10	341	11.3	7	270	3	71	-	-	-	-
Colorado	94	6 620	36.1	77	6 118	14	444	2	34	1	24
New Mexico	21	1 269	18.7	16	951	5	318	-	-	-	-
Arizona	43	2 493	17.8	31	2 026	12	467	-	-	-	-
Utah	29	1 499	20.5	21	1 291	8	208	-	-	-	-
Nevada	15	616	22.1	6	379	9	237	-	-	-	-
Pacific:											
Washington	176	8 716	27.8	138	7 799	30	701	4	105	4	111
Oregon	89	4 953	22.8	67	4 392	19	452	1	57	2	52
California	886	64 390	37.5	754	55 983	106	7 124	19	908	7	375
Alaska	7	140	23.0	1	37	5	38	1	65	-	-
Hawaii	17	1 089	26.4	10	707	6	360	1	22	-	-
Outlying areas:											
Guam	1	23	18.8	-	-	1	23	-	-	-	-
Puerto Rico	6	481	3.1	1	75	5	406	-	-	-	-
Virgin Islands	-	-	0.0	-	-	-	-	-	-	-	-
Other outlying areas	-	-	0.0	-	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.2 NUMBER OF EXTENDED CARE FACILITIES, BEDS, AND BEDS PER 1,000 ENROLLED POPULATION, BY TYPE OF FACILITY, FOR POPULATION SIZE GROUPS OF STANDARD METROPOLITAN STATISTICAL AREAS, AND FOR EACH AREA OF 500,000 POPULATION OR MORE

[See NOTES preceding General Tables]

Standard metropolitan statistical area	All facilities			Skilled nursing facility ¹		Unit of hospital		Unit of domiciliary institution		Other	
	Number	Beds	Beds per 1,000 enrolled population	Number	Beds	Number	Beds	Number	Beds	Number	Beds
ALL SMSA'S											
Total	3 098	244 897	20.0	2 641	212 863	279	19 731	147	10 916	31	1 387
1965 Population of—											
3,000,000 or more	768	68 894	19.0	675	60 244	40	4 826	47	3 582	6	242
1,000,000 to 3,000,000	897	72 439	26.5	770	64 311	89	5 686	25	1 898	13	544
500,000 to 1,000,000	607	46 342	17.9	510	38 599	53	3 781	39	3 724	5	238
250,000 to 500,000	447	31 990	19.1	370	28 234	52	2 698	22	930	3	128
100,000 to 250,000	335	22 062	15.6	280	18 786	41	2 531	12	678	2	67
50,000 to 100,000	44	3 170	17.4	36	2 689	4	209	2	104	2	168
SMSA'S OF 500,000 OR MORE											
Akron, Ohio	7	727	12.6	4	485	2	166	1	76	-	-
Albany-Schenectady-Troy, N. Y.	6	746	9.3	4	395	1	31	1	320	-	-
Allentown-Bethlehem-Easton, Pa.	9	541	-	8	476	1	65	-	-	-	-
Anaheim-Santa Ana-Garden Grove, Calif.	50	4 006	45.2	48	3 895	1	78	1	33	-	-
Atlanta, Ga.	14	1 815	21.1	14	1 815	-	-	-	-	-	-
Baltimore, Md.	27	2 685	16.9	25	2 418	1	104	1	163	-	-
Birmingham, Ala.	16	1 007	16.3	16	1 007	-	-	-	-	-	-
Boston-Lowell-Lawrence, Mass., SEA	82	6 544	17.8	75	5 447	5	832	1	97	1	168
Bridgeport-Stamford-Norwalk, Conn., SEA	33	2 710	38.0	32	2 694	-	-	1	16	-	-
Buffalo, N. Y.	12	1 337	10.2	12	1 337	-	-	-	-	-	-
Chicago, Ill.	74	5 650	9.3	58	4 722	3	242	12	673	1	13
Cincinnati, Ohio-Ky., Ind.	40	2 976	22.8	37	2 758	2	163	1	55	-	-
Cleveland, Ohio	39	3 561	19.3	36	3 374	2	172	-	-	1	15
Columbus, Ohio	12	1 024	15.1	11	974	-	-	1	50	-	-
Dallas, Tex.	37	3 061	30.2	30	2 752	3	117	2	56	2	136
Dayton, Ohio	13	799	13.0	10	659	2	90	1	50	-	-
Denver, Colo.	45	3 901	42.8	38	3 603	5	250	1	24	1	24
Detroit, Mich.	56	5 185	15.6	49	4 746	2	128	4	299	1	12
Fort Worth, Tex.	26	1 918	35.6	24	1 727	2	191	-	-	-	-
Gary-Hammond-East Chicago, Ind.	5	517	12.4	5	517	-	-	-	-	-	-
Greensboro-Winston-Salem-High Point, N.C.	8	469	-	5	343	-	-	3	126	-	-
Grand Rapids, Mich.	12	1 163	-	7	504	1	31	4	628	-	-
Hartford-New Britain-Bristol, Conn., SEA	44	3 430	46.1	41	3 329	1	19	2	82	-	-
Honolulu, Hawaii	12	814	28.4	8	611	3	181	1	22	-	-
Houston, Tex.	38	3 021	27.9	30	2 560	7	391	1	70	-	-
Indianapolis, Ind.	12	1 035	11.7	12	1 035	-	-	-	-	-	-
Jersey City, N. J.	4	327	4.9	3	284	1	43	-	-	-	-
Kansas City, Mo.-Kans.	16	836	7.4	9	639	6	185	-	-	1	12
Los Angeles-Long Beach, Calif.	298	23 605	37.8	275	22 228	15	880	7	468	1	29
Louisville, Ky.-Ind.	12	1 076	15.0	11	1 022	1	54	-	-	-	-
Memphis, Tenn.-Ark.	9	826	13.7	7	702	2	124	-	-	-	-
Miami, Fla.	35	3 208	22.5	29	2 809	3	230	3	169	-	-
Milwaukee, Wis.	39	2 889	22.9	34	2 653	3	176	1	43	1	17
Minneapolis-St. Paul, Minn.	49	3 344	21.4	41	2 905	7	399	1	40	-	-
Nashville, Tenn.	12	1 090	-	6	507	4	440	2	143	-	-
New Haven-Meriden-Waterbury, Conn., SEA	61	3 608	48.3	58	3 543	-	-	3	65	-	-
New Orleans, La.	13	966	11.9	11	742	1	29	1	195	-	-
New York, N. Y.	165	21 200	17.2	141	17 013	10	2 585	13	1 592	1	10
Newark, N. J.	22	1 519	8.4	19	1 344	1	100	2	75	-	-
Norfolk-Portsmouth, Va.	11	666	17.7	10	637	1	29	-	-	-	-
Oklahoma City, Okla.	3	316	6.3	1	148	-	-	-	-	2	168
Omaha, Nebr.-Iowa	13	1 316	-	6	522	5	546	2	248	-	-
Paterson-Clifton-Passaic, N. J.	7	532	4.1	5	358	2	174	-	-	-	-
Philadelphia, Pa.-N. J.	93	6 710	14.8	77	6 088	5	159	10	453	1	10
Phoenix, Ariz.	19	985	12.8	14	875	5	110	-	-	-	-
Pittsburgh, Pa.	30	3 204	12.9	22	2 435	4	182	4	587	-	-
Portland, Oreg.-Wash.	43	2 918	27.7	39	2 807	2	59	-	-	2	52
Providence-Pawtucket-Warwick, R. I., SEA	15	876	9.9	14	801	-	-	1	75	-	-
Rochester, N. Y.	12	1 708	20.1	7	791	-	-	5	917	-	-
Sacramento, Calif.	32	2 564	43.1	25	1 978	7	586	-	-	-	-
St. Louis, Mo.-Ill.	44	3 759	16.8	40	3 562	3	184	-	-	1	13
Salt Lake City, Utah	11	736	-	11	736	-	-	-	-	-	-
San Antonio, Tex.	12	1 091	17.7	9	618	2	288	1	185	-	-
San Bernardino-Riverside-Ontario, Calif.	59	3 880	34.0	52	3 584	6	276	-	-	1	20
San Diego, Calif.	46	4 075	37.6	37	3 078	8	976	-	-	1	21
San Francisco-Oakland, Calif.	139	9 843	34.8	118	8 309	15	1 180	3	81	3	273
San Jose, Calif.	32	2 227	36.7	25	2 013	3	104	4	110	-	-
Seattle-Everett, Wash.	53	2 938	24.8	43	2 619	8	256	1	50	1	13
Springfield-Chicopee-Holyoke, Mass., SEA	12	884	14.3	9	527	2	326	1	31	-	-
Syracuse, N. Y.	6	865	14.5	3	356	-	-	3	509	-	-
Tampa-St. Petersburg, Fla.	39	3 134	17.3	34	2 924	3	177	1	15	1	18
Toledo, Ohio-Mich.	14	1 212	19.0	13	1 156	-	-	1	56	-	-
Washington, D.C.-Md.-Va.	31	4 048	27.8	28	3 727	1	64	2	257	-	-
Worcester, Mass., SEA	23	1 601	22.3	22	1 538	1	63	-	-	-	-
Youngstown-Warren, Ohio	9	451	9.2	8	393	1	58	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
ALL AREAS								
All Facilities								
Total	4 886	1 076	568	508	3 352	458	32	426
Less than 25 beds.....	651	287	152	135	267	97	5	92
25 to 49 beds	1 250	333	186	147	789	128	6	122
50 to 74 beds	1 285	222	120	102	980	83	9	74
75 to 99 beds	770	96	45	51	631	43	3	40
100 to 149 beds	647	78	40	38	524	45	2	43
150 to 199 beds	170	35	17	18	115	20	1	19
200 beds or more	113	25	8	17	46	42	6	36
Skilled Nursing Facility ¹								
Total	3 963	550	295	255	3 221	192	10	182
Less than 25 beds.....	322	77	43	34	232	13	1	12
25 to 49 beds	983	174	105	69	753	56	1	55
50 to 74 beds	1 124	130	70	60	952	42	5	37
75 to 99 beds	716	74	35	39	617	25	-	25
100 to 149 beds	583	50	23	27	509	24	1	23
150 to 199 beds	150	24	11	13	114	12	-	12
200 beds or more	85	21	8	13	44	20	2	18
Unit of Hospital								
Total	677	353	145	208	88	236	16	220
Less than 25 beds.....	264	152	64	88	28	84	4	80
25 to 49 beds	196	107	41	66	24	65	4	61
50 to 74 beds	115	61	25	36	19	35	2	33
75 to 99 beds	34	12	4	8	8	14	1	13
100 to 149 beds	42	17	10	7	7	18	1	17
150 to 199 beds	10	2	1	1	1	7	1	6
200 beds or more	16	2	-	2	1	13	3	10
Unit of Domiciliary Institution								
Total	205	150	109	41	27	28	4	24
Less than 25 beds.....	47	42	30	12	5	-	-	-
25 to 49 beds	61	50	39	11	5	6	-	6
50 to 74 beds	42	29	24	5	8	5	1	4
75 to 99 beds	19	10	6	4	5	4	2	2
100 to 149 beds	16	9	6	3	4	3	-	3
150 to 199 beds	9	8	4	4	-	1	-	1
200 beds or more	11	2	-	2	-	9	1	8
Other								
Total	41	23	19	4	16	2	2	-
Less than 25 beds.....	18	16	15	1	2	-	-	-
25 to 49 beds	10	2	1	1	7	1	1	-
50 to 74 beds	4	2	1	1	1	1	1	-
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	6	2	1	1	4	-	-	-
150 to 199 beds	1	1	1	-	-	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
UNITED STATES								
All Facilities								
Total	4 879	1 073	567	506	3 352	454	30	424
Less than 25 beds.....	650	287	152	135	267	96	4	92
25 to 49 beds	1 247	331	185	146	789	127	6	121
50 to 74 beds	1 284	221	120	101	980	83	9	74
75 to 99 beds	769	96	45	51	631	42	3	39
100 to 149 beds	647	78	40	38	524	45	2	43
150 to 199 beds	170	35	17	18	115	20	1	19
200 beds or more	112	25	8	17	46	41	5	36
Skilled Nursing Facility ¹								
Total	3 962	550	295	255	3 221	191	10	181
Less than 25 beds.....	322	77	43	34	232	13	1	12
25 to 49 beds	983	174	105	69	753	56	1	55
50 to 74 beds	1 124	130	70	60	952	42	5	37
75 to 99 beds	715	74	35	39	617	24	-	24
100 to 149 beds	583	50	23	27	509	24	1	23
150 to 199 beds	150	24	11	13	114	12	-	12
200 beds or more	85	21	8	13	44	20	2	18
Unit of Hospital								
Total	671	350	144	206	88	233	14	219
Less than 25 beds.....	263	152	64	88	28	83	3	80
25 to 49 beds	193	105	40	65	24	64	4	60
50 to 74 beds	114	60	25	35	19	35	2	33
75 to 99 beds	34	12	4	8	8	14	1	13
100 to 149 beds	42	17	10	7	7	18	1	17
150 to 199 beds	10	2	1	1	1	7	1	6
200 beds or more	15	2	-	2	1	12	2	10

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
UNITED STATES—Con.								
Unit of Domiciliary Institution								
Total	205	150	109	41	27	28	4	24
Less than 25 beds	47	42	30	12	5	-	-	-
25 to 49 beds	61	50	39	11	5	6	-	6
50 to 74 beds	42	29	24	5	8	5	1	4
75 to 99 beds	19	10	6	4	5	4	2	2
100 to 149 beds	16	9	6	3	4	3	-	3
150 to 199 beds	9	8	4	4	-	1	-	1
200 beds or more	11	2	-	2	-	9	1	8
Other								
Total	41	23	19	4	16	2	2	-
Less than 25 beds	18	16	15	1	2	-	-	-
25 to 49 beds	10	2	1	1	7	1	1	-
50 to 74 beds	4	2	1	1	1	1	1	-
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	6	2	1	1	4	-	-	-
150 to 199 beds	1	1	1	-	-	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
NORTHEASTERN STATES								
All Facilities								
Total	975	203	104	99	716	56	7	49
Less than 25 beds	105	46	24	22	57	2	1	1
25 to 49 beds	251	65	34	31	181	5	1	4
50 to 74 beds	217	42	24	18	168	7	1	6
75 to 99 beds	138	13	6	7	117	8	2	6
100 to 149 beds	175	19	9	10	143	13	1	12
150 to 199 beds	43	9	5	4	31	3	-	3
200 beds or more	46	9	2	7	19	18	1	17
Skilled Nursing Facility ¹								
Total	822	95	56	39	704	23	-	23
Less than 25 beds	62	10	6	4	51	1	-	1
25 to 49 beds	213	32	19	13	179	2	-	2
50 to 74 beds	197	24	16	8	168	5	-	5
75 to 99 beds	125	7	5	2	116	2	-	2
100 to 149 beds	157	10	5	5	142	5	-	5
150 to 199 beds	38	5	3	2	31	2	-	2
200 beds or more	30	7	2	5	17	6	-	6
Unit of Hospital								
Total	72	46	7	39	8	18	6	12
Less than 25 beds	23	17	3	14	5	1	1	-
25 to 49 beds	21	18	2	16	1	2	1	1
50 to 74 beds	8	6	1	5	-	2	1	1
75 to 99 beds	4	1	-	1	-	3	1	2
100 to 149 beds	9	3	1	2	1	5	1	4
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	7	1	-	1	1	5	1	4
Unit of Domiciliary Institution								
Total	74	57	37	20	2	15	1	14
Less than 25 beds	17	16	12	4	1	-	-	-
25 to 49 beds	16	15	13	2	-	1	-	1
50 to 74 beds	11	11	7	4	-	-	-	-
75 to 99 beds	9	5	1	4	1	3	1	2
100 to 149 beds	9	6	3	3	-	3	-	3
150 to 199 beds	4	3	1	2	-	1	-	1
200 beds or more	8	1	-	1	-	7	-	7
Other								
Total	7	5	4	1	2	-	-	-
Less than 25 beds	3	3	3	-	-	-	-	-
25 to 49 beds	1	-	-	-	1	-	-	-
50 to 74 beds	1	1	-	1	-	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	1	1	1	-	-	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
NORTH CENTRAL STATES								
All Facilities								
Total	1 213	415	239	176	618	180	8	172
Less than 25 beds	202	98	60	38	66	38	1	37
25 to 49 beds	332	139	77	62	146	47	1	46
50 to 74 beds	316	95	55	40	195	26	2	24
75 to 99 beds	146	39	21	18	87	20	1	19
100 to 149 beds	146	30	21	9	95	21	-	21
150 to 199 beds	42	8	4	4	22	12	-	12
200 beds or more	29	6	1	5	7	16	3	13

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
NORTH CENTRAL STATES—Con.								
Skilled Nursing Facility ¹								
Total	907	218	120	98	597	92	4	88
Less than 25 beds	94	28	15	13	62	4	-	4
25 to 49 beds	230	71	41	30	138	21	-	21
50 to 74 beds	263	57	33	24	189	17	2	15
75 to 99 beds	132	31	15	16	85	16	-	16
100 to 149 beds	126	19	12	7	94	13	-	13
150 to 199 beds	38	7	3	4	22	9	-	9
200 beds or more	24	5	1	4	7	12	2	10
Unit of Hospital								
Total	238	143	73	70	12	83	1	82
Less than 25 beds	95	58	35	23	3	34	1	33
25 to 49 beds	74	47	19	28	3	24	-	24
50 to 74 beds	39	27	11	16	3	9	-	9
75 to 99 beds	9	4	2	2	2	3	-	3
100 to 149 beds	16	7	6	1	1	8	-	8
150 to 199 beds	3	-	-	-	-	3	-	3
200 beds or more	2	-	-	-	-	2	-	2
Unit of Domiciliary Institution								
Total	57	47	40	7	6	4	2	2
Less than 25 beds	7	6	4	2	1	-	-	-
25 to 49 beds	25	21	17	4	3	1	-	1
50 to 74 beds	13	11	11	-	2	-	-	-
75 to 99 beds	5	4	4	-	-	1	1	-
100 to 149 beds	3	3	3	-	-	-	-	-
150 to 199 beds	1	1	1	-	-	-	-	-
200 beds or more	3	1	-	1	-	2	1	1
Other								
Total	11	7	6	1	3	1	1	-
Less than 25 beds	6	6	6	-	-	-	-	-
25 to 49 beds	3	-	-	-	2	1	1	-
50 to 74 beds	1	-	-	-	1	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	1	1	-	1	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
SOUTH								
All Facilities								
Total	1 229	214	96	118	929	86	6	80
Less than 25 beds	121	49	21	28	61	11	1	10
25 to 49 beds	312	66	36	30	204	42	2	40
50 to 74 beds	381	41	15	26	317	23	3	20
75 to 99 beds	168	21	7	14	144	3	-	3
100 to 149 beds	182	15	6	9	164	3	-	3
150 to 199 beds	42	14	6	8	28	-	-	-
200 beds or more	23	8	5	3	11	4	-	4
Skilled Nursing Facility ¹								
Total	1 060	138	61	77	875	47	2	45
Less than 25 beds	67	18	5	13	48	1	-	1
25 to 49 beds	264	42	24	18	195	27	1	26
50 to 74 beds	340	26	10	16	302	12	1	11
75 to 99 beds	157	19	7	12	136	2	-	2
100 to 149 beds	174	15	6	9	156	3	-	3
150 to 199 beds	37	10	4	6	27	-	-	-
200 beds or more	21	8	5	3	11	2	-	2
Unit of Hospital								
Total	125	52	17	35	38	35	3	32
Less than 25 beds	42	22	9	13	10	10	1	9
25 to 49 beds	37	16	5	11	7	14	1	13
50 to 74 beds	32	12	3	9	12	8	1	7
75 to 99 beds	7	2	-	2	4	1	-	1
100 to 149 beds	4	-	-	-	4	-	-	-
150 to 199 beds	1	-	-	-	1	-	-	-
200 beds or more	2	-	-	-	-	2	-	2
Unit of Domiciliary Institution								
Total	37	22	16	6	12	3	-	3
Less than 25 beds	9	7	5	2	2	-	-	-
25 to 49 beds	11	8	7	1	2	1	-	1
50 to 74 beds	8	3	2	1	3	2	-	2
75 to 99 beds	3	-	-	-	3	-	-	-
100 to 149 beds	2	-	-	-	2	-	-	-
150 to 199 beds	4	4	2	2	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
SOUTH—Con.								
Other								
Total	7	2	2	-	4	1	1	-
Less than 25 beds	3	2	2	-	1	-	-	-
25 to 49 beds	-	-	-	-	-	-	-	-
50 to 74 beds	1	-	-	-	-	1	1	-
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	2	-	-	-	2	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
WEST								
All Facilities								
Total	1 462	241	128	113	1 089	132	9	123
Less than 25 beds	222	94	47	47	83	45	1	44
25 to 49 beds	352	61	38	23	258	33	2	31
50 to 74 beds	370	43	26	17	300	27	3	24
75 to 99 beds	317	23	11	12	283	11	-	11
100 to 149 beds	144	14	4	10	122	8	1	7
150 to 199 beds	43	4	2	2	34	5	1	4
200 beds or more	14	2	-	2	9	3	1	2
Skilled Nursing Facility ¹								
Total	1 173	99	58	41	1 045	29	4	25
Less than 25 beds	99	21	17	4	71	7	1	6
25 to 49 beds	276	29	21	8	241	6	-	6
50 to 74 beds	324	23	11	12	293	8	2	6
75 to 99 beds	301	17	8	9	280	4	-	4
100 to 149 beds	126	6	-	6	117	3	1	2
150 to 199 beds	37	2	1	1	34	1	-	1
200 beds or more	10	1	-	1	9	-	-	-
Unit of Hospital								
Total	236	109	47	62	30	97	4	93
Less than 25 beds	103	55	17	38	10	38	-	38
25 to 49 beds	61	24	14	10	13	24	2	22
50 to 74 beds	35	15	10	5	4	16	-	16
75 to 99 beds	14	5	2	3	2	7	-	7
100 to 149 beds	13	7	3	4	1	5	-	5
150 to 199 beds	6	2	1	1	-	4	1	3
200 beds or more	4	1	-	1	-	3	1	2
Unit of Domiciliary Institution								
Total	37	24	16	8	7	6	1	5
Less than 25 beds	14	13	9	4	1	-	-	-
25 to 49 beds	9	6	2	4	-	3	-	3
50 to 74 beds	10	4	4	-	3	3	1	2
75 to 99 beds	2	1	1	-	1	-	-	-
100 to 149 beds	2	-	-	-	2	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Other								
Total	16	9	7	2	7	-	-	-
Less than 25 beds	6	5	4	1	1	-	-	-
25 to 49 beds	6	2	1	1	4	-	-	-
50 to 74 beds	1	1	1	-	-	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	3	1	1	-	2	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
NEW ENGLAND								
All Facilities								
Total	411	54	22	32	340	17	6	11
Less than 25 beds	46	13	5	8	32	1	1	-
25 to 49 beds	126	23	10	13	99	4	1	3
50 to 74 beds	100	9	4	5	86	5	1	4
75 to 99 beds	65	1	-	1	62	2	1	1
100 to 149 beds	61	2	-	2	57	2	1	1
150 to 199 beds	6	3	2	1	3	-	-	-
200 beds or more	7	3	1	2	1	3	1	2
Skilled Nursing Facility ¹								
Total	376	33	14	19	335	8	-	8
Less than 25 beds	31	3	1	2	28	-	-	-
25 to 49 beds	116	16	7	9	99	1	-	1
50 to 74 beds	99	9	4	5	86	4	-	4
75 to 99 beds	62	-	-	-	61	1	-	1
100 to 149 beds	59	1	-	1	57	1	-	1
150 to 199 beds	5	2	1	1	3	-	-	-
200 beds or more	4	2	1	1	1	1	-	1

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
NEW ENGLAND—Con.								
Unit of Hospital								
Total	22	11	1	10	3	8	6	2
Less than 25 beds	10	6	1	5	3	1	1	-
25 to 49 beds	5	3	-	3	-	2	1	1
50 to 74 beds	1	-	-	-	-	1	1	-
75 to 99 beds	1	-	-	-	-	1	1	-
100 to 149 beds	2	1	-	1	-	1	1	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	3	1	-	1	-	2	1	1
Unit of Domiciliary Institution								
Total	12	9	6	3	2	1	-	1
Less than 25 beds	5	4	3	1	1	-	-	-
25 to 49 beds	5	4	3	1	-	1	-	1
50 to 74 beds	-	-	-	-	-	-	-	-
75 to 99 beds	2	1	-	1	1	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Other								
Total	1	1	1	-	-	-	-	-
Less than 25 beds	-	-	-	-	-	-	-	-
25 to 49 beds	-	-	-	-	-	-	-	-
50 to 74 beds	-	-	-	-	-	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	1	1	1	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
MIDDLE ATLANTIC								
All Facilities								
Total	564	149	82	67	376	39	1	38
Less than 25 beds	59	33	19	14	25	1	-	1
25 to 49 beds	125	42	24	18	82	1	-	1
50 to 74 beds	117	33	20	13	82	2	-	2
75 to 99 beds	73	12	6	6	55	6	1	5
100 to 149 beds	114	17	9	8	86	11	-	11
150 to 199 beds	37	6	3	3	28	3	-	3
200 beds or more	39	6	1	5	18	15	-	15
Skilled Nursing Facility ¹								
Total	446	62	42	20	369	15	-	15
Less than 25 beds	31	7	5	2	23	1	-	1
25 to 49 beds	97	16	12	4	80	1	-	1
50 to 74 beds	98	15	12	3	82	1	-	1
75 to 99 beds	63	7	5	2	55	1	-	1
100 to 149 beds	98	9	5	4	85	4	-	4
150 to 199 beds	33	3	2	1	28	2	-	2
200 beds or more	26	5	1	4	16	5	-	5
Unit of Hospital								
Total	50	35	6	29	5	10	-	10
Less than 25 beds	13	11	2	9	2	-	-	-
25 to 49 beds	16	15	2	13	1	-	-	-
50 to 74 beds	7	6	1	5	-	1	-	1
75 to 99 beds	3	1	-	1	-	2	-	2
100 to 149 beds	7	2	1	1	1	4	-	4
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	4	-	-	-	1	3	-	3
Unit of Domiciliary Institution								
Total	62	48	31	17	-	14	1	13
Less than 25 beds	12	12	9	3	-	-	-	-
25 to 49 beds	11	11	10	1	-	-	-	-
50 to 74 beds	11	11	7	4	-	-	-	-
75 to 99 beds	7	4	1	3	-	3	1	2
100 to 149 beds	9	6	3	3	-	3	-	3
150 to 199 beds	4	3	1	2	-	1	-	1
200 beds or more	8	1	-	1	-	7	-	7
Other								
Total	6	4	3	1	2	-	-	-
Less than 25 beds	3	3	3	-	-	-	-	-
25 to 49 beds	1	-	-	-	1	-	-	-
50 to 74 beds	1	1	-	1	-	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	1	-	-	-	1	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
EAST NORTH CENTRAL								
All Facilities								
Total	762	214	121	93	440	108	6	102
Less than 25 beds	74	34	21	13	32	8	1	7
25 to 49 beds	206	76	43	33	108	22	1	21
50 to 74 beds	203	50	27	23	136	17	1	16
75 to 99 beds	111	25	13	12	66	20	1	19
100 to 149 beds	111	17	13	4	77	17	-	17
150 to 199 beds	35	6	3	3	17	12	-	12
200 beds or more	22	6	1	5	4	12	2	10
Skilled Nursing Facility ¹								
Total	617	116	59	57	427	74	2	72
Less than 25 beds	44	12	7	5	29	3	-	3
25 to 49 beds	151	38	19	19	103	10	-	10
50 to 74 beds	175	28	15	13	133	14	1	13
75 to 99 beds	99	18	8	10	65	16	-	16
100 to 149 beds	98	10	7	3	76	12	-	12
150 to 199 beds	31	5	2	3	17	9	-	9
200 beds or more	19	5	1	4	4	10	1	9
Unit of Hospital								
Total	95	57	26	31	7	31	1	30
Less than 25 beds	19	12	6	6	2	5	1	4
25 to 49 beds	36	24	11	13	1	11	-	11
50 to 74 beds	19	14	4	10	2	3	-	3
75 to 99 beds	8	4	2	2	1	3	-	3
100 to 149 beds	9	3	3	-	1	5	-	5
150 to 199 beds	3	-	-	-	-	3	-	3
200 beds or more	1	-	-	-	-	1	-	1
Unit of Domiciliary Institution								
Total	43	36	32	4	5	2	2	-
Less than 25 beds	7	6	4	2	1	-	-	-
25 to 49 beds	17	14	13	1	3	-	-	-
50 to 74 beds	9	8	8	-	1	-	-	-
75 to 99 beds	4	3	3	-	-	1	1	-
100 to 149 beds	3	3	3	-	-	-	-	-
150 to 199 beds	1	1	1	-	-	-	-	-
200 beds or more	2	1	-	1	-	1	1	-
Other								
Total	7	5	4	1	1	1	1	-
Less than 25 beds	4	4	4	-	-	-	-	-
25 to 49 beds	2	-	-	-	1	1	1	-
50 to 74 beds	-	-	-	-	-	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	1	1	-	1	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
WEST NORTH CENTRAL								
All Facilities								
Total	451	201	118	83	178	72	2	70
Less than 25 beds	128	64	39	25	34	30	-	30
25 to 49 beds	126	63	34	29	38	25	-	25
50 to 74 beds	113	45	28	17	59	9	1	8
75 to 99 beds	35	14	8	6	21	-	-	-
100 to 149 beds	35	13	8	5	18	4	-	4
150 to 199 beds	7	2	1	1	5	-	-	-
200 beds or more	7	-	-	-	3	4	1	3
Skilled Nursing Facility ¹								
Total	290	102	61	41	170	18	2	16
Less than 25 beds	50	16	8	8	33	1	-	1
25 to 49 beds	79	33	22	11	35	11	-	11
50 to 74 beds	88	29	18	11	56	3	1	2
75 to 99 beds	33	13	7	6	20	-	-	-
100 to 149 beds	28	9	5	4	18	1	-	1
150 to 199 beds	7	2	1	1	5	-	-	-
200 beds or more	5	-	-	-	3	2	1	1
Unit of Hospital								
Total	143	86	47	39	5	52	-	52
Less than 25 beds	76	46	29	17	1	29	-	29
25 to 49 beds	38	23	8	15	2	13	-	13
50 to 74 beds	20	13	7	6	1	6	-	6
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	7	4	3	1	-	3	-	3
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	1	-	-	-	-	1	-	1

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
WEST NORTH CENTRAL—Con.								
Unit of Domiciliary Institution								
Total	14	11	8	3	1	2	-	2
Less than 25 beds	-	-	-	-	-	-	-	-
25 to 49 beds	8	7	4	3	-	1	-	1
50 to 74 beds	4	3	3	-	1	-	-	-
75 to 99 beds	1	1	1	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	1	-	-	-	-	1	-	1
Other								
Total	4	2	2	-	2	-	-	-
Less than 25 beds	2	2	2	-	-	-	-	-
25 to 49 beds	1	-	-	-	1	-	-	-
50 to 74 beds	1	-	-	-	1	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
SOUTH ATLANTIC								
All Facilities								
Total	497	98	37	61	379	20	2	18
Less than 25 beds	34	15	6	9	19	-	-	-
25 to 49 beds	118	33	18	15	72	13	1	12
50 to 74 beds	137	21	3	18	114	2	1	1
75 to 99 beds	86	9	1	8	76	1	-	1
100 to 149 beds	82	7	2	5	73	2	-	2
150 to 199 beds	27	8	4	4	19	-	-	-
200 beds or more	13	5	3	2	6	2	-	2
Skilled Nursing Facility ¹								
Total	435	63	24	39	361	11	-	11
Less than 25 beds	22	5	1	4	17	-	-	-
25 to 49 beds	98	21	13	8	71	6	-	6
50 to 74 beds	119	10	1	9	109	-	-	-
75 to 99 beds	80	9	1	8	70	1	-	1
100 to 149 beds	78	7	2	5	69	2	-	2
150 to 199 beds	25	6	3	3	19	-	-	-
200 beds or more	13	5	3	2	6	2	-	2
Unit of Hospital								
Total	43	22	4	18	13	8	1	7
Less than 25 beds	7	6	2	4	1	-	-	-
25 to 49 beds	16	8	2	6	1	7	1	6
50 to 74 beds	14	8	-	8	5	1	-	1
75 to 99 beds	3	-	-	-	3	-	-	-
100 to 149 beds	3	-	-	-	3	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Unit of Domiciliary Institution								
Total	17	12	8	4	5	-	-	-
Less than 25 beds	4	3	2	1	1	-	-	-
25 to 49 beds	4	4	3	1	-	-	-	-
50 to 74 beds	3	3	2	1	-	-	-	-
75 to 99 beds	3	-	-	-	3	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
150 to 199 beds	2	2	1	1	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Other								
Total	2	1	1	-	-	1	1	-
Less than 25 beds	1	1	1	-	-	-	-	-
25 to 49 beds	-	-	-	-	-	-	-	-
50 to 74 beds	1	-	-	-	-	1	1	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
EAST SOUTH CENTRAL								
All Facilities								
Total	235	31	13	18	165	39	-	39
Less than 25 beds	9	2	1	1	3	4	-	4
25 to 49 beds	82	15	9	6	48	19	-	19
50 to 74 beds	72	6	1	5	53	13	-	13
75 to 99 beds	34	2	-	2	31	1	-	1
100 to 149 beds	31	4	2	2	26	1	-	1
150 to 199 beds	5	2	-	2	3	-	-	-
200 beds or more	2	-	-	-	1	1	-	1

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
EAST SOUTH CENTRAL—Con.								
Skilled Nursing Facility ¹								
Total	208	24	9	15	159	25	-	25
Less than 25 beds	4	1	1	-	3	-	-	-
25 to 49 beds	73	10	6	4	46	17	-	17
50 to 74 beds	63	5	-	5	51	7	-	7
75 to 99 beds	32	2	-	2	30	-	-	-
100 to 149 beds	30	4	2	2	25	1	-	1
150 to 199 beds	5	2	-	2	3	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	23	5	2	3	5	13	-	13
Less than 25 beds	5	1	-	1	-	4	-	4
25 to 49 beds	7	3	1	2	2	2	-	2
50 to 74 beds	8	1	1	-	2	5	-	5
75 to 99 beds	2	-	-	-	1	1	-	1
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	1	-	-	-	-	1	-	1
Unit of Domiciliary Institution								
Total	4	2	2	-	1	1	-	1
Less than 25 beds	-	-	-	-	-	-	-	-
25 to 49 beds	2	2	2	-	-	-	-	-
50 to 74 beds	1	-	-	-	-	1	-	1
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
Less than 25 beds	-	-	-	-	-	-	-	-
25 to 49 beds	-	-	-	-	-	-	-	-
50 to 74 beds	-	-	-	-	-	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
WEST SOUTH CENTRAL								
All Facilities								
Total	497	85	46	39	385	27	4	23
Less than 25 beds	78	32	14	18	39	7	1	6
25 to 49 beds	112	18	9	9	84	10	1	9
50 to 74 beds	172	14	11	3	150	8	2	6
75 to 99 beds	48	10	6	4	37	1	-	1
100 to 149 beds	69	4	2	2	65	-	-	-
150 to 199 beds	10	4	2	2	6	-	-	-
200 beds or more	8	3	2	1	4	1	-	1
Skilled Nursing Facility ¹								
Total	417	51	28	23	355	11	2	9
Less than 25 beds	41	12	3	9	28	1	-	1
25 to 49 beds	93	11	5	6	78	4	1	3
50 to 74 beds	158	11	9	2	142	5	1	4
75 to 99 beds	45	8	6	2	36	1	-	1
100 to 149 beds	66	4	2	2	62	-	-	-
150 to 199 beds	7	2	1	1	5	-	-	-
200 beds or more	7	3	2	1	4	-	-	-
Unit of Hospital								
Total	59	25	11	14	20	14	2	12
Less than 25 beds	30	15	7	8	9	6	1	5
25 to 49 beds	14	5	2	3	4	5	-	5
50 to 74 beds	10	3	2	1	5	2	1	1
75 to 99 beds	2	2	-	2	-	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
150 to 199 beds	1	-	-	-	1	-	-	-
200 beds or more	1	-	-	-	-	1	-	1
Unit of Domiciliary Institution								
Total	16	8	6	2	6	2	-	2
Less than 25 beds	5	4	3	1	1	-	-	-
25 to 49 beds	5	2	2	-	2	1	-	1
50 to 74 beds	4	-	-	-	3	1	-	1
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	2	2	1	1	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
WEST SOUTH CENTRAL—Con.								
Other								
Total	5	1	1	-	4	-	-	-
Less than 25 beds	2	1	1	-	1	-	-	-
25 to 49 beds	-	-	-	-	-	-	-	-
50 to 74 beds	-	-	-	-	-	-	-	-
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	2	-	-	-	2	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
MOUNTAIN								
All Facilities								
Total	287	71	30	41	173	43	3	40
Less than 25 beds	68	35	13	22	18	15	-	15
25 to 49 beds	65	15	7	8	40	10	-	10
50 to 74 beds	67	9	5	4	45	13	1	12
75 to 99 beds	42	9	5	4	30	3	-	3
100 to 149 beds	39	3	-	3	35	1	1	-
150 to 199 beds	5	-	-	-	4	1	1	-
200 beds or more	1	-	-	-	1	-	-	-
Skilled Nursing Facility ¹								
Total	203	25	13	12	162	16	2	14
Less than 25 beds	23	6	5	1	15	2	-	2
25 to 49 beds	43	4	1	3	36	3	-	3
50 to 74 beds	57	6	3	3	44	7	1	6
75 to 99 beds	40	7	4	3	30	3	-	3
100 to 149 beds	35	2	-	2	32	1	1	-
150 to 199 beds	4	-	-	-	4	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	70	38	12	26	8	24	1	23
Less than 25 beds	40	24	4	20	3	13	-	13
25 to 49 beds	17	8	5	3	4	5	-	5
50 to 74 beds	8	3	2	1	-	5	-	5
75 to 99 beds	2	2	1	1	-	-	-	-
100 to 149 beds	2	1	-	1	1	-	-	-
150 to 199 beds	1	-	-	-	-	1	1	-
200 beds or more	-	-	-	-	-	-	-	-
Unit of Domiciliary Institution								
Total	11	6	4	2	2	3	-	3
Less than 25 beds	4	4	3	1	-	-	-	-
25 to 49 beds	4	2	1	1	-	2	-	2
50 to 74 beds	2	-	-	-	1	1	-	1
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Other								
Total	3	2	1	1	1	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-
25 to 49 beds	1	1	-	1	-	-	-	-
50 to 74 beds	-	-	-	-	-	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
PACIFIC								
All Facilities								
Total	1 175	170	98	72	916	89	6	83
Less than 25 beds	154	59	34	25	65	30	1	29
25 to 49 beds	287	46	31	15	218	23	2	21
50 to 74 beds	303	34	21	13	255	14	2	12
75 to 99 beds	275	14	6	8	253	8	-	8
100 to 149 beds	105	11	4	7	87	7	-	7
150 to 199 beds	38	4	2	2	30	4	-	4
200 beds or more	13	2	-	2	8	3	1	2
Skilled Nursing Facility ¹								
Total	970	74	45	29	883	13	2	11
Less than 25 beds	76	15	12	3	56	5	1	4
25 to 49 beds	233	25	20	5	205	3	-	3
50 to 74 beds	267	17	8	9	249	1	1	-
75 to 99 beds	261	10	4	6	250	1	-	1
100 to 149 beds	91	4	-	4	85	2	-	2
150 to 199 beds	33	2	1	1	30	1	-	1
200 beds or more	9	1	-	1	8	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
PACIFIC—Con.								
Unit of Hospital								
Total	166	71	35	36	22	73	3	70
Less than 25 beds	63	31	13	18	7	25	—	25
25 to 49 beds	44	16	9	7	9	19	2	17
50 to 74 beds	27	12	8	4	4	11	—	11
75 to 99 beds	12	3	1	2	2	7	—	7
100 to 149 beds	11	6	3	3	—	5	—	5
150 to 199 beds	5	2	1	1	—	3	—	3
200 beds or more	4	1	—	1	—	3	1	2
Unit of Domiciliary Institution								
Total	26	18	12	6	5	3	1	2
Less than 25 beds	10	9	6	3	1	—	—	—
25 to 49 beds	5	4	1	3	—	1	—	1
50 to 74 beds	8	4	4	—	2	2	1	1
75 to 99 beds	2	1	1	—	1	—	—	—
100 to 149 beds	1	—	—	—	1	—	—	—
150 to 199 beds	—	—	—	—	—	—	—	—
200 beds or more	—	—	—	—	—	—	—	—
Other								
Total	13	7	6	1	6	—	—	—
Less than 25 beds	5	4	3	1	1	—	—	—
25 to 49 beds	5	1	1	—	4	—	—	—
50 to 74 beds	1	1	1	—	—	—	—	—
75 to 99 beds	—	—	—	—	—	—	—	—
100 to 149 beds	2	1	1	—	1	—	—	—
150 to 199 beds	—	—	—	—	—	—	—	—
200 beds or more	—	—	—	—	—	—	—	—
ALABAMA								
All Facilities								
Total	96	7	3	4	74	15	—	15
Less than 25 beds	1	—	—	—	1	—	—	—
25 to 49 beds	35	5	3	2	20	10	—	10
50 to 74 beds	27	1	—	1	22	4	—	4
75 to 99 beds	17	1	—	1	16	—	—	—
100 to 149 beds	15	—	—	—	14	1	—	1
150 to 199 beds	1	—	—	—	1	—	—	—
200 beds or more	—	—	—	—	—	—	—	—
Skilled Nursing Facility ¹								
Total	94	6	2	4	74	14	—	14
Less than 25 beds	1	—	—	—	1	—	—	—
25 to 49 beds	34	4	2	2	20	10	—	10
50 to 74 beds	26	1	—	1	22	3	—	3
75 to 99 beds	17	1	—	1	16	—	—	—
100 to 149 beds	15	—	—	—	14	1	—	1
150 to 199 beds	1	—	—	—	1	—	—	—
Unit of Hospital								
Total	1	—	—	—	—	1	—	1
50 to 74 beds	1	—	—	—	—	1	—	1
Unit of Domiciliary Institution								
Total	1	1	1	—	—	—	—	—
25 to 49 beds	1	1	1	—	—	—	—	—
Other								
Total	—	—	—	—	—	—	—	—
ALASKA								
All Facilities								
Total	7	4	2	2	1	2	1	1
Less than 25 beds	5	4	2	2	—	1	—	1
25 to 49 beds	1	—	—	—	1	—	—	—
50 to 74 beds	1	—	—	—	—	1	1	—
75 to 99 beds	—	—	—	—	—	—	—	—
100 to 149 beds	—	—	—	—	—	—	—	—
150 to 199 beds	—	—	—	—	—	—	—	—
200 beds or more	—	—	—	—	—	—	—	—
Skilled Nursing Facility ¹								
Total	1	—	—	—	1	—	—	—
25 to 49 beds	1	—	—	—	1	—	—	—

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
ALASKA—Con.								
Unit of Hospital								
Total	5	4	2	2	-	1	-	-
Less than 25 beds	5	4	2	2	-	1	-	-
Unit of Domiciliary Institution								
Total	1	-	-	-	-	1	1	-
50 to 74 beds	1	-	-	-	-	1	1	-
Other								
Total	-	-	-	-	-	-	-	-
ARIZONA								
All Facilities								
Total	43	13	3	10	27	3	-	-
Less than 25 beds	6	5	1	4	-	1	-	-
25 to 49 beds	14	2	-	2	11	1	-	-
50 to 74 beds	10	2	1	1	7	1	-	-
75 to 99 beds	8	3	1	2	5	-	-	-
100 to 149 beds	5	1	-	1	4	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	31	5	3	2	25	1	-	-
Less than 25 beds	2	1	1	-	-	1	-	-
25 to 49 beds	9	-	-	-	9	-	-	-
50 to 74 beds	8	1	1	-	7	-	-	-
75 to 99 beds	8	3	1	2	5	-	-	-
100 to 149 beds	4	-	-	-	4	-	-	-
Unit of Hospital								
Total	12	8	-	8	2	2	-	-
Less than 25 beds	4	4	-	4	-	-	-	-
25 to 49 beds	5	2	-	2	2	1	-	-
50 to 74 beds	2	1	-	1	-	1	-	-
100 to 149 beds	1	1	-	1	-	-	-	-
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
ARKANSAS								
All Facilities								
Total	41	11	5	6	22	8	-	-
Less than 25 beds	8	5	3	2	2	1	-	-
25 to 49 beds	11	4	1	3	2	5	-	-
50 to 74 beds	10	1	-	1	7	2	-	-
75 to 99 beds	2	1	1	-	1	-	-	-
100 to 149 beds	9	-	-	-	9	-	-	-
150 to 199 beds	1	-	-	-	1	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	27	5	2	3	20	2	-	-
Less than 25 beds	4	2	1	1	2	-	-	-
25 to 49 beds	5	2	-	2	2	1	-	-
50 to 74 beds	6	-	-	-	5	1	-	-
75 to 99 beds	2	1	1	-	1	-	-	-
100 to 149 beds	9	-	-	-	9	-	-	-
150 to 199 beds	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	12	6	3	3	1	5	-	-
Less than 25 beds	4	3	2	1	-	1	-	-
25 to 49 beds	6	2	1	1	-	4	-	-
50 to 74 beds	2	1	-	1	1	-	-	-
Unit of Domiciliary Institution								
Total	2	-	-	-	1	1	-	-
50 to 74 beds	2	-	-	-	1	1	-	-
Other								
Total	-	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
CALIFORNIA								
All Facilities								
Total	886	96	49	47	733	57	3	54
Less than 25 beds	63	27	11	16	28	8	-	8
25 to 49 beds	218	29	19	10	171	18	1	17
50 to 74 beds	248	19	12	7	217	12	1	11
75 to 99 beds	225	6	3	3	212	7	-	7
100 to 149 beds	89	10	3	7	73	6	-	6
150 to 199 beds	31	3	1	2	25	3	-	3
200 beds or more	12	2	-	2	7	3	1	2
Skilled Nursing Facility ¹								
Total	754	40	19	21	708	6	1	5
Less than 25 beds	31	6	3	3	24	1	-	1
25 to 49 beds	179	16	11	5	161	2	-	2
50 to 74 beds	221	9	4	5	211	1	1	-
75 to 99 beds	212	3	1	2	209	-	-	-
100 to 149 beds	77	4	-	4	71	2	-	2
150 to 199 beds	26	1	-	1	25	-	-	-
200 beds or more	8	1	-	1	7	-	-	-
Unit of Hospital								
Total	106	38	19	19	18	50	2	48
Less than 25 beds	24	13	4	9	4	7	-	7
25 to 49 beds	31	8	6	2	8	15	1	14
50 to 74 beds	22	7	5	2	4	11	-	11
75 to 99 beds	11	2	1	1	2	7	-	7
100 to 149 beds	9	5	2	3	-	4	-	4
150 to 199 beds	5	2	1	1	-	3	-	3
200 beds or more	4	1	-	1	-	3	1	2
Unit of Domiciliary Institution								
Total	19	14	8	6	4	1	-	1
Less than 25 beds	6	6	3	3	-	-	-	-
25 to 49 beds	5	4	1	3	-	1	-	1
50 to 74 beds	5	3	3	-	2	-	-	-
75 to 99 beds	2	1	1	-	1	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
Other								
Total	7	4	3	1	3	-	-	-
Less than 25 beds	2	2	1	1	-	-	-	-
25 to 49 beds	3	1	1	-	2	-	-	-
100 to 149 beds	2	1	1	-	1	-	-	-
COLORADO								
All Facilities								
Total	94	20	9	11	70	4	1	3
Less than 25 beds	16	11	4	7	3	2	-	2
25 to 49 beds	18	4	2	2	14	-	-	-
50 to 74 beds	21	4	2	2	16	1	1	-
75 to 99 beds	14	1	1	-	12	1	-	1
100 to 149 beds	21	-	-	-	21	-	-	-
150 to 199 beds	3	-	-	-	3	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
Skilled Nursing Facility ¹								
Total	77	7	4	3	68	2	1	1
Less than 25 beds	5	2	2	-	3	-	-	-
25 to 49 beds	14	1	-	1	13	-	-	-
50 to 74 beds	20	3	1	2	16	1	1	-
75 to 99 beds	14	1	1	-	12	1	-	1
100 to 149 beds	20	-	-	-	20	-	-	-
150 to 199 beds	3	-	-	-	3	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	14	10	3	7	2	2	-	2
Less than 25 beds	8	6	-	6	-	2	-	2
25 to 49 beds	4	3	2	1	1	-	-	-
50 to 74 beds	1	1	1	-	-	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
Unit of Domiciliary Institution								
Total	2	2	1	1	-	-	-	-
Less than 25 beds	2	2	1	1	-	-	-	-
Other								
Total	1	1	1	-	-	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
CONNECTICUT								
All Facilities								
Total	185	18	11	7	161	6	-	6
Less than 25 beds	21	4	3	1	17	-	-	-
25 to 49 beds	63	7	6	1	56	-	-	-
50 to 74 beds	37	3	1	2	31	3	-	3
75 to 99 beds	29	-	-	-	28	1	-	1
100 to 149 beds	27	1	-	1	25	1	-	1
150 to 199 beds	5	2	1	1	3	-	-	-
200 beds or more	3	1	-	1	1	1	-	1
Skilled Nursing Facility ¹								
Total	176	11	6	5	159	6	-	6
Less than 25 beds	15	-	-	-	15	-	-	-
25 to 49 beds	60	4	4	-	56	-	-	-
50 to 74 beds	37	3	1	2	31	3	-	3
75 to 99 beds	29	-	-	-	28	1	-	1
100 to 149 beds	27	1	-	1	25	1	-	1
150 to 199 beds	5	2	1	1	3	-	-	-
200 beds or more	3	1	-	1	1	1	-	1
Unit of Hospital								
Total	1	-	-	-	1	-	-	-
Less than 25 beds	1	-	-	-	1	-	-	-
Unit of Domiciliary Institution								
Total	8	7	5	2	1	-	-	-
Less than 25 beds	5	4	3	1	1	-	-	-
25 to 49 beds	3	3	2	1	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
DELAWARE								
All Facilities								
Total	9	6	2	4	3	-	-	-
Less than 25 beds	1	1	-	1	-	-	-	-
25 to 49 beds	2	2	1	1	-	-	-	-
50 to 74 beds	4	2	1	1	2	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	2	1	-	1	1	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	6	3	-	3	3	-	-	-
Less than 25 beds	1	1	-	1	-	-	-	-
25 to 49 beds	1	1	-	1	-	-	-	-
50 to 74 beds	2	-	-	-	2	-	-	-
100 to 149 beds	2	1	-	1	1	-	-	-
Unit of Hospital								
Total	1	1	-	1	-	-	-	-
50 to 74 beds	1	1	-	1	-	-	-	-
Unit of Domiciliary Institution								
Total	2	2	2	-	-	-	-	-
25 to 49 beds	1	1	1	-	-	-	-	-
50 to 74 beds	1	1	1	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
DISTRICT OF COLUMBIA								
All Facilities								
Total	7	4	1	3	2	1	-	1
Less than 25 beds	1	-	-	-	1	-	-	-
25 to 49 beds	-	-	-	-	-	-	-	-
50 to 74 beds	1	1	-	1	-	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	4	3	1	2	1	-	-	-
200 beds or more	1	-	-	-	-	1	-	1

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
DISTRICT OF COLUMBIA—Con.								
Skilled Nursing Facility¹								
Total	5	2	—	2	2	1	—	1
Less than 25 beds	1	—	—	—	1	—	—	—
150 to 199 beds	3	2	—	2	1	—	—	—
200 beds or more	1	—	—	—	—	1	—	1
Unit of Hospital								
Total	1	1	—	1	—	—	—	—
50 to 74 beds	1	1	—	1	—	—	—	—
Unit of Domiciliary Institution								
Total	1	1	1	—	—	—	—	—
150 to 199 beds	1	1	1	—	—	—	—	—
Other								
Total	—	—	—	—	—	—	—	—
FLORIDA								
All Facilities								
Total	170	32	16	16	136	2	—	2
Less than 25 beds	11	6	4	2	5	—	—	—
25 to 49 beds	39	15	8	7	23	1	—	1
50 to 74 beds	49	5	1	4	44	—	—	—
75 to 99 beds	26	2	1	1	24	—	—	—
100 to 149 beds	30	3	1	2	26	1	—	1
150 to 199 beds	11	—	—	—	11	—	—	—
200 beds or more	4	1	1	—	3	—	—	—
Skilled Nursing Facility¹								
Total	148	23	11	12	124	1	—	1
Less than 25 beds	6	2	1	1	4	—	—	—
25 to 49 beds	33	11	6	5	22	—	—	—
50 to 74 beds	44	4	1	3	40	—	—	—
75 to 99 beds	23	2	1	1	21	—	—	—
100 to 149 beds	27	3	1	2	23	1	—	1
150 to 199 beds	11	—	—	—	11	—	—	—
200 beds or more	4	1	1	—	3	—	—	—
Unit of Hospital								
Total	15	4	1	3	10	1	—	1
Less than 25 beds	1	—	—	—	1	—	—	—
25 to 49 beds	5	3	1	2	1	1	—	1
50 to 74 beds	5	1	—	1	4	—	—	—
75 to 99 beds	2	—	—	—	2	—	—	—
100 to 149 beds	2	—	—	—	2	—	—	—
Unit of Domiciliary Institution								
Total	6	4	3	1	2	—	—	—
Less than 25 beds	3	3	2	1	—	—	—	—
25 to 49 beds	1	1	1	—	—	—	—	—
75 to 99 beds	1	—	—	—	1	—	—	—
100 to 149 beds	1	—	—	—	1	—	—	—
Other								
Total	1	1	1	—	—	—	—	—
Less than 25 beds	1	1	1	—	—	—	—	—
GEORGIA								
All Facilities								
Total	77	6	3	3	64	7	—	7
Less than 25 beds	—	—	—	—	—	—	—	—
25 to 49 beds	18	—	—	—	11	7	—	7
50 to 74 beds	31	2	—	2	29	—	—	—
75 to 99 beds	8	—	—	—	8	—	—	—
100 to 149 beds	14	1	1	—	13	—	—	—
150 to 199 beds	3	2	2	—	1	—	—	—
200 beds or more	3	1	—	1	2	—	—	—
Skilled Nursing Facility¹								
Total	70	5	3	2	63	2	—	2
25 to 49 beds	13	—	—	—	11	2	—	2
50 to 74 beds	29	1	—	1	28	—	—	—
75 to 99 beds	8	—	—	—	8	—	—	—
100 to 149 beds	14	1	1	—	13	—	—	—
150 to 199 beds	3	2	2	—	1	—	—	—
200 beds or more	3	1	—	1	2	—	—	—

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
GEORGIA—Con.								
Unit of Hospital								
Total	7	1	-	1	1	5	-	5
25 to 49 beds	5	-	-	-	-	5	-	5
50 to 74 beds	2	1	-	1	1	-	-	-
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
HAWAII								
All Facilities								
Total	17	8	3	5	5	4	2	2
Less than 25 beds	2	1	1	-	-	1	1	-
25 to 49 beds	7	3	2	1	2	2	1	1
50 to 74 beds	3	1	-	1	2	-	-	-
75 to 99 beds	3	3	-	3	-	-	-	-
100 to 149 beds	1	-	-	-	-	1	-	1
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
Skilled Nursing Facility ¹								
Total	10	4	2	2	5	1	1	-
Less than 25 beds	1	-	-	-	-	1	1	-
25 to 49 beds	4	2	2	-	2	-	-	-
50 to 74 beds	2	-	-	-	2	-	-	-
75 to 99 beds	2	2	-	2	-	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	6	3	-	3	-	3	1	2
25 to 49 beds	3	1	-	1	-	2	1	1
50 to 74 beds	1	1	-	1	-	-	-	-
75 to 99 beds	1	1	-	1	-	-	-	-
100 to 149 beds	1	-	-	-	-	1	-	1
Unit of Domiciliary Institution								
Total	1	1	1	-	-	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
IDAHO								
All Facilities								
Total	42	4	2	2	26	12	-	12
Less than 25 beds	5	-	-	-	3	2	-	2
25 to 49 beds	11	2	1	1	4	5	-	5
50 to 74 beds	10	-	-	-	7	3	-	3
75 to 99 beds	12	2	1	1	8	2	-	2
100 to 149 beds	4	-	-	-	4	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	31	1	-	1	23	7	-	7
Less than 25 beds	4	-	-	-	3	1	-	1
25 to 49 beds	6	-	-	-	4	2	-	2
50 to 74 beds	8	-	-	-	6	2	-	2
75 to 99 beds	11	1	-	1	8	2	-	2
100 to 149 beds	2	-	-	-	2	-	-	-
Unit of Hospital								
Total	5	2	2	-	-	3	-	3
Less than 25 beds	1	-	-	-	-	1	-	1
25 to 49 beds	2	1	1	-	-	1	-	1
50 to 74 beds	1	-	-	-	-	1	-	1
75 to 99 beds	1	1	1	-	-	-	-	-
Unit of Domiciliary Institution								
Total	4	-	-	-	2	2	-	2
25 to 49 beds	2	-	-	-	-	2	-	2
50 to 74 beds	1	-	-	-	1	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
IDAHO—Con.								
Other								
Total	2	1	-	1	1	-	-	-
25 to 49 beds	1	1	-	1	-	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
ILLINOIS								
All Facilities								
Total	173	49	29	20	110	14	1	13
Less than 25 beds	18	8	5	3	6	4	1	3
25 to 49 beds	57	18	12	6	37	2	-	2
50 to 74 beds	48	14	9	5	33	1	-	1
75 to 99 beds	24	6	2	4	15	3	-	3
100 to 149 beds	20	2	1	1	17	1	-	1
150 to 199 beds	2	-	-	-	2	-	-	-
200 beds or more	4	1	-	1	-	3	-	3
Skilled Nursing Facility ¹								
Total	135	20	7	13	107	8	-	8
Less than 25 beds	6	1	-	1	5	-	-	-
25 to 49 beds	44	7	2	5	36	1	-	1
50 to 74 beds	41	8	5	3	32	1	-	1
75 to 99 beds	21	3	-	3	15	3	-	3
100 to 149 beds	18	1	-	1	17	-	-	-
150 to 199 beds	2	-	-	-	2	-	-	-
200 beds or more	3	-	-	-	-	3	-	3
Unit of Hospital								
Total	18	11	5	6	1	6	1	5
Less than 25 beds	7	3	1	2	-	4	1	3
25 to 49 beds	3	2	1	1	-	1	-	1
50 to 74 beds	5	4	2	2	1	-	-	-
75 to 99 beds	2	2	1	1	-	-	-	-
100 to 149 beds	1	-	-	-	-	1	-	1
Unit of Domiciliary Institution								
Total	19	17	16	1	2	-	-	-
Less than 25 beds	4	3	3	-	1	-	-	-
25 to 49 beds	10	9	9	-	1	-	-	-
50 to 74 beds	2	2	2	-	-	-	-	-
75 to 99 beds	1	1	1	-	-	-	-	-
100 to 149 beds	1	1	1	-	-	-	-	-
200 beds or more	1	1	-	1	-	-	-	-
Other								
Total	1	1	1	-	-	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-
INDIANA								
All Facilities								
Total	71	14	10	4	53	4	-	4
Less than 25 beds	5	1	-	1	3	1	-	1
25 to 49 beds	19	7	5	2	12	-	-	-
50 to 74 beds	19	3	2	1	16	-	-	-
75 to 99 beds	11	3	3	-	7	1	-	1
100 to 149 beds	11	-	-	-	11	-	-	-
150 to 199 beds	3	-	-	-	3	-	-	-
200 beds or more	3	-	-	-	1	2	-	2
Skilled Nursing Facility ¹								
Total	63	8	5	3	52	3	-	3
Less than 25 beds	4	1	-	1	3	-	-	-
25 to 49 beds	14	2	1	1	12	-	-	-
50 to 74 beds	18	3	2	1	15	-	-	-
75 to 99 beds	10	2	2	-	7	1	-	1
100 to 149 beds	11	-	-	-	11	-	-	-
150 to 199 beds	3	-	-	-	3	-	-	-
200 beds or more	3	-	-	-	1	2	-	2
Unit of Hospital								
Total	6	4	3	1	1	1	-	1
Less than 25 beds	1	-	-	-	-	1	-	1
25 to 49 beds	3	3	2	1	-	-	-	-
50 to 74 beds	1	-	-	-	1	-	-	-
75 to 99 beds	1	1	1	-	-	-	-	-
Unit of Domiciliary Institution								
Total	2	2	2	-	-	-	-	-
25 to 49 beds	2	2	2	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
INDIANA—Con.								
Other								
Total	-	-	-	-	-	-	-	-
IOWA								
All Facilities								
Total	75	22	11	11	40	13	1	12
Less than 25 beds	5	2	1	1	1	2	-	2
25 to 49 beds	24	7	2	5	10	7	-	7
50 to 74 beds	38	10	7	3	24	4	1	3
75 to 99 beds	7	3	1	2	4	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	52	12	5	7	37	3	1	2
Less than 25 beds	2	1	-	1	1	-	-	-
25 to 49 beds	15	4	2	2	9	2	-	2
50 to 74 beds	27	4	2	2	22	1	1	-
75 to 99 beds	7	3	1	2	4	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	18	7	4	3	1	10	-	10
Less than 25 beds	3	1	1	-	-	2	-	2
25 to 49 beds	7	2	-	2	-	5	-	5
50 to 74 beds	8	4	3	1	1	3	-	3
Unit of Domiciliary Institution								
Total	3	3	2	1	-	-	-	-
25 to 49 beds	1	1	-	1	-	-	-	-
50 to 74 beds	2	2	2	-	-	-	-	-
Other								
Total	2	-	-	-	2	-	-	-
25 to 49 beds	1	-	-	-	1	-	-	-
50 to 74 beds	1	-	-	-	1	-	-	-
KANSAS								
All Facilities								
Total	73	28	18	10	24	21	-	21
Less than 25 beds	44	19	13	6	7	18	-	18
25 to 49 beds	12	7	5	2	3	2	-	2
50 to 74 beds	9	2	-	2	7	-	-	-
75 to 99 beds	5	-	-	-	5	-	-	-
100 to 149 beds	3	-	-	-	2	1	-	1
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	30	5	2	3	22	3	-	3
Less than 25 beds	9	2	-	2	6	1	-	1
25 to 49 beds	6	2	2	-	3	1	-	1
50 to 74 beds	8	1	-	1	7	-	-	-
75 to 99 beds	4	-	-	-	4	-	-	-
100 to 149 beds	3	-	-	-	2	1	-	1
Unit of Hospital								
Total	43	23	16	7	2	18	-	18
Less than 25 beds	35	17	13	4	1	17	-	17
25 to 49 beds	6	5	3	2	-	1	-	1
50 to 74 beds	1	1	-	1	-	-	-	-
75 to 99 beds	1	-	-	-	1	-	-	-
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
KENTUCKY								
All Facilities								
Total	60	12	3	9	41	7	-	7
Less than 25 beds	1	-	-	-	-	1	-	1
25 to 49 beds	20	4	1	3	14	2	-	2
50 to 74 beds	21	3	-	3	14	4	-	4
75 to 99 beds	6	-	-	-	6	-	-	-
100 to 149 beds	10	3	2	1	7	-	-	-
150 to 199 beds	2	2	-	2	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	52	10	3	7	40	2	-	2
25 to 49 beds	16	2	1	1	13	1	-	1
50 to 74 beds	18	3	-	3	14	1	-	1
75 to 99 beds	6	-	-	-	6	-	-	-
100 to 149 beds	10	3	2	1	7	-	-	-
150 to 199 beds	2	2	-	2	-	-	-	-
Unit of Hospital								
Total	7	2	-	2	1	4	-	4
Less than 25 beds	1	-	-	-	-	1	-	1
25 to 49 beds	4	2	-	2	1	1	-	1
50 to 74 beds	2	-	-	-	-	2	-	2
Unit of Domiciliary Institution								
Total	1	-	-	-	-	1	-	1
50 to 74 beds	1	-	-	-	-	1	-	1
Other								
Total	-	-	-	-	-	-	-	-
LOUISIANA								
All Facilities								
Total	118	15	7	8	100	3	1	2
Less than 25 beds	14	3	-	3	11	-	-	-
25 to 49 beds	26	3	1	2	22	1	-	1
50 to 74 beds	52	6	4	2	44	2	1	1
75 to 99 beds	9	1	1	-	8	-	-	-
100 to 149 beds	15	1	1	-	14	-	-	-
150 to 199 beds	1	1	-	1	-	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
Skilled Nursing Facility ¹								
Total	111	13	7	6	97	1	-	1
Less than 25 beds	13	3	-	3	10	-	-	-
25 to 49 beds	23	2	1	1	20	1	-	1
50 to 74 beds	50	6	4	2	44	-	-	-
75 to 99 beds	9	1	1	-	8	-	-	-
100 to 149 beds	15	1	1	-	14	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	5	1	-	1	2	2	1	1
25 to 49 beds	3	1	-	1	2	-	-	-
50 to 74 beds	2	-	-	-	-	2	1	1
Unit of Domiciliary Institution								
Total	2	1	-	1	1	-	-	-
Less than 25 beds	1	-	-	-	1	-	-	-
150 to 199 beds	1	1	-	1	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
MAINE								
All Facilities								
Total	25	9	2	7	14	2	-	2
Less than 25 beds	7	3	1	2	4	-	-	-
25 to 49 beds	10	6	1	5	3	1	-	1
50 to 74 beds	8	-	-	-	7	1	-	1
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
MAINE—Con.								
Skilled Nursing Facility ¹								
Total	18	3	1	2	14	1	-	1
Less than 25 beds	4	-	-	-	4	-	-	-
25 to 49 beds	6	3	1	2	3	-	-	-
50 to 74 beds	8	-	-	-	7	1	-	1
Unit of Hospital								
Total	7	6	1	5	-	1	-	1
Less than 25 beds	3	3	1	2	-	-	-	-
25 to 49 beds	4	3	-	3	-	1	-	1
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
MARYLAND								
All Facilities								
Total	54	8	2	6	45	1	-	1
Less than 25 beds	3	-	-	-	3	-	-	-
25 to 49 beds	5	-	-	-	4	1	-	1
50 to 74 beds	8	2	-	2	6	-	-	-
75 to 99 beds	16	1	-	1	15	-	-	-
100 to 149 beds	15	1	-	1	14	-	-	-
150 to 199 beds	4	2	1	1	2	-	-	-
200 beds of more	3	2	1	1	1	-	-	-
Skilled Nursing Facility ¹								
Total	50	7	2	5	42	1	-	1
Less than 25 beds	3	-	-	-	3	-	-	-
25 to 49 beds	5	-	-	-	4	1	-	1
50 to 74 beds	8	2	-	2	6	-	-	-
75 to 99 beds	14	1	-	1	13	-	-	-
100 to 149 beds	14	1	-	1	13	-	-	-
150 to 199 beds	3	1	1	-	2	-	-	-
200 beds of more	3	2	1	1	1	-	-	-
Unit of Hospital								
Total	1	-	-	-	1	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
Unit of Domiciliary Institution								
Total	3	1	-	1	2	-	-	-
75 to 99 beds	2	-	-	-	2	-	-	-
150 to 199 beds	1	1	-	1	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
MASSACHUSETTS								
All Facilities								
Total	156	15	5	10	134	7	5	2
Less than 25 beds	6	1	-	1	5	-	-	-
25 to 49 beds	39	7	1	6	30	2	1	1
50 to 74 beds	41	3	2	1	37	1	1	-
75 to 99 beds	33	-	-	-	32	1	1	-
100 to 149 beds	32	1	-	1	30	1	1	-
150 to 199 beds	1	1	1	-	-	-	-	-
200 beds or more	4	2	1	1	-	2	1	1
Skilled Nursing Facility ¹								
Total	144	12	4	8	132	-	-	-
Less than 25 beds	5	1	-	1	4	-	-	-
25 to 49 beds	37	7	1	6	30	-	-	-
50 to 74 beds	40	3	2	1	37	-	-	-
75 to 99 beds	31	-	-	-	31	-	-	-
100 to 149 beds	30	-	-	-	30	-	-	-
200 beds or more	1	1	1	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
MASSACHUSETTS—Con.								
Unit of Hospital								
Total	9	2	-	2	1	6	5	1
Less than 25 beds	1	-	-	-	1	-	-	-
25 to 49 beds	1	-	-	-	-	1	1	-
50 to 74 beds	1	-	-	-	-	1	1	-
75 to 99 beds	1	-	-	-	-	1	1	-
100 to 149 beds	2	1	-	1	-	1	1	-
200 beds or more	3	1	-	1	-	2	1	-
Unit of Domiciliary Institution								
Total	2	-	-	-	1	1	-	1
25 to 49 beds	1	-	-	-	-	1	-	1
75 to 99 beds	1	-	-	-	1	-	-	-
Other								
Total	1	1	1	-	-	-	-	-
150 to 199 beds	1	1	1	-	-	-	-	-
MICHIGAN								
All Facilities								
Total	143	29	11	18	78	36	1	35
Less than 25 beds	8	5	3	2	3	-	-	-
25 to 49 beds	27	7	2	5	14	6	-	6
50 to 74 beds	39	6	2	4	28	5	-	5
75 to 99 beds	17	1	-	1	9	7	-	7
100 to 149 beds	35	6	3	3	19	10	-	10
150 to 199 beds	10	2	1	1	3	5	-	5
200 beds or more	7	2	-	2	2	3	1	2
Skilled Nursing Facility ¹								
Total	111	14	5	9	73	24	-	24
Less than 25 beds	4	2	2	-	2	-	-	-
25 to 49 beds	15	2	1	1	11	2	-	2
50 to 74 beds	35	3	-	3	28	4	-	4
75 to 99 beds	16	-	-	-	9	7	-	7
100 to 149 beds	30	4	2	2	18	8	-	8
150 to 199 beds	6	1	-	1	3	2	-	2
200 beds or more	5	2	-	2	2	1	-	1
Unit of Hospital								
Total	20	7	1	6	2	11	-	11
Less than 25 beds	1	-	-	-	1	-	-	-
25 to 49 beds	9	5	1	4	-	4	-	4
50 to 74 beds	2	1	-	1	-	1	-	1
75 to 99 beds	1	1	-	1	-	-	-	-
100 to 149 beds	3	-	-	-	1	2	-	2
150 to 199 beds	3	-	-	-	-	3	-	3
200 beds or more	1	-	-	-	-	1	-	1
Unit of Domiciliary Institution								
Total	9	6	4	2	2	1	1	-
Less than 25 beds	2	2	-	2	-	-	-	-
25 to 49 beds	2	-	-	-	2	-	-	-
50 to 74 beds	2	2	2	-	-	-	-	-
100 to 149 beds	1	1	1	-	-	-	-	-
150 to 199 beds	1	1	1	-	-	-	-	-
200 beds or more	1	-	-	-	-	1	1	-
Other								
Total	3	2	1	1	1	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-
25 to 49 beds	1	-	-	-	1	-	-	-
100 to 149 beds	1	1	-	1	-	-	-	-
MINNESOTA								
All Facilities								
Total	147	75	41	34	46	26	1	25
Less than 25 beds	36	15	5	10	17	4	-	4
25 to 49 beds	58	31	16	15	12	15	-	15
50 to 74 beds	28	17	11	6	7	4	-	4
75 to 99 beds	6	3	2	1	3	-	-	-
100 to 149 beds	15	8	6	2	5	2	-	2
150 to 199 beds	3	1	1	-	2	-	-	-
200 beds or more	1	-	-	-	-	1	1	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
MINNESOTA—Con.								
Skilled Nursing Facility ¹								
Total	98	42	28	14	46	10	1	9
Less than 25 beds	21	4	2	2	17	-	-	-
25 to 49 beds	33	14	9	5	12	7	-	7
50 to 74 beds	23	14	10	4	7	2	-	2
75 to 99 beds	6	3	2	1	3	-	-	-
100 to 149 beds	11	6	4	2	5	-	-	-
150 to 199 beds	3	1	1	-	2	-	-	-
200 beds or more	1	-	-	-	-	1	1	-
Unit of Hospital								
Total	45	30	10	20	-	15	-	15
Less than 25 beds	15	11	3	8	-	4	-	4
25 to 49 beds	21	14	4	10	-	7	-	7
50 to 74 beds	5	3	1	2	-	2	-	2
100 to 149 beds	4	2	2	-	-	2	-	2
Unit of Domiciliary Institution								
Total	4	3	3	-	-	1	-	1
25 to 49 beds	4	3	3	-	-	1	-	1
Other								
Total	-	-	-	-	-	-	-	-
MISSISSIPPI								
All Facilities								
Total	22	-	-	-	18	4	-	4
Less than 25 beds	3	-	-	-	-	3	-	3
25 to 49 beds	8	-	-	-	7	1	-	1
50 to 74 beds	9	-	-	-	9	-	-	-
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	18	-	-	-	17	1	-	1
25 to 49 beds	8	-	-	-	7	1	-	1
50 to 74 beds	8	-	-	-	8	-	-	-
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	4	-	-	-	1	3	-	3
Less than 25 beds	3	-	-	-	-	3	-	3
50 to 74 beds	1	-	-	-	1	-	-	-
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
MISSOURI								
All Facilities								
Total	75	27	13	14	41	7	-	7
Less than 25 beds	25	14	7	7	7	4	-	4
25 to 49 beds	15	3	1	2	11	1	-	1
50 to 74 beds	13	4	3	1	9	-	-	-
75 to 99 beds	5	2	1	1	3	-	-	-
100 to 149 beds	10	3	1	2	6	1	-	1
150 to 199 beds	3	1	-	1	2	-	-	-
200 beds or more	4	-	-	-	3	1	-	1
Skilled Nursing Facility ¹								
Total	57	16	6	10	39	2	-	2
Less than 25 beds	12	5	2	3	7	-	-	-
25 to 49 beds	12	2	-	2	9	1	-	1
50 to 74 beds	12	3	2	1	9	-	-	-
75 to 99 beds	5	2	1	1	3	-	-	-
100 to 149 beds	9	3	1	2	6	-	-	-
150 to 199 beds	3	1	-	1	2	-	-	-
200 beds or more	4	-	-	-	3	1	-	1

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
MISSOURI—Con.								
Unit of Hospital								
Total	16	9	5	4	2	5	—	5
Less than 25 beds	11	7	3	4	—	4	—	4
25 to 49 beds	3	1	1	—	2	—	—	—
50 to 74 beds	1	1	1	—	—	—	—	—
100 to 149 beds	1	—	—	—	—	1	—	1
Unit of Domiciliary Institution								
Total	—	—	—	—	—	—	—	—
Other								
Total	2	2	2	—	—	—	—	—
Less than 25 beds	2	2	2	—	—	—	—	—
MONTANA								
All Facilities								
Total	33	17	7	10	9	7	—	7
Less than 25 beds	15	12	4	8	1	2	—	2
25 to 49 beds	7	4	2	2	2	1	—	1
50 to 74 beds	7	—	—	—	3	4	—	4
75 to 99 beds	2	1	1	—	1	—	—	—
100 to 149 beds	1	—	—	—	1	—	—	—
150 to 199 beds	1	—	—	—	1	—	—	—
200 beds or more	—	—	—	—	—	—	—	—
Skilled Nursing Facility ¹								
Total	14	4	2	2	9	1	—	1
Less than 25 beds	2	1	—	1	1	—	—	—
25 to 49 beds	4	2	1	1	2	—	—	—
50 to 74 beds	4	—	—	—	3	1	—	1
75 to 99 beds	2	1	1	—	1	—	—	—
100 to 149 beds	1	—	—	—	1	—	—	—
150 to 199 beds	1	—	—	—	1	—	—	—
Unit of Hospital								
Total	14	9	2	7	—	5	—	5
Less than 25 beds	11	9	2	7	—	2	—	2
25 to 49 beds	1	—	—	—	—	1	—	1
50 to 74 beds	2	—	—	—	—	2	—	2
Unit of Domiciliary Institution								
Total	5	4	3	1	—	1	—	1
Less than 25 beds	2	2	2	—	—	—	—	—
25 to 49 beds	2	2	1	1	—	—	—	—
50 to 74 beds	1	—	—	—	—	1	—	1
Other								
Total	—	—	—	—	—	—	—	—
NEBRASKA								
All Facilities								
Total	34	13	10	3	17	4	—	4
Less than 25 beds	7	4	4	—	2	1	—	1
25 to 49 beds	2	1	—	1	1	—	—	—
50 to 74 beds	12	6	5	1	5	1	—	1
75 to 99 beds	5	—	—	—	5	—	—	—
100 to 149 beds	5	2	1	1	3	—	—	—
150 to 199 beds	1	—	—	—	1	—	—	—
200 beds or more	2	—	—	—	—	2	—	2
Skilled Nursing Facility ¹								
Total	21	4	4	—	17	—	—	—
Less than 25 beds	4	2	2	—	2	—	—	—
25 to 49 beds	1	—	—	—	1	—	—	—
50 to 74 beds	7	2	2	—	5	—	—	—
75 to 99 beds	5	—	—	—	5	—	—	—
100 to 149 beds	3	—	—	—	3	—	—	—
150 to 199 beds	1	—	—	—	1	—	—	—
Unit of Hospital								
Total	10	7	5	2	—	3	—	3
Less than 25 beds	3	2	2	—	—	1	—	1
50 to 74 beds	4	3	2	1	—	1	—	—
100 to 149 beds	2	2	1	1	—	—	—	—
200 beds or more	1	—	—	—	—	1	—	—

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
NEBRASKA—Con.								
Unit of Domiciliary Institution								
Total	3	2	1	1	-	1	-	1
25 to 49 beds	1	1	-	1	-	-	-	-
50 to 74 beds	1	1	1	-	-	-	-	-
200 beds or more	1	-	-	-	-	1	-	1
Other								
Total	-	-	-	-	-	-	-	-
NEVADA								
All Facilities								
Total	15	1	1	-	8	6	-	6
Less than 25 beds	8	1	1	-	3	4	-	4
25 to 49 beds	2	-	-	-	1	1	-	1
50 to 74 beds	3	-	-	-	2	1	-	1
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	6	1	1	-	5	-	-	-
Less than 25 beds	2	1	1	-	1	-	-	-
50 to 74 beds	2	-	-	-	2	-	-	-
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	9	-	-	-	3	6	-	6
Less than 25 beds	6	-	-	-	2	4	-	4
25 to 49 beds	2	-	-	-	1	1	-	1
50 to 74 beds	1	-	-	-	-	1	-	1
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
NEW HAMPSHIRE								
All Facilities								
Total	12	5	2	3	7	-	-	-
Less than 25 beds	5	4	1	3	1	-	-	-
25 to 49 beds	4	1	1	-	3	-	-	-
50 to 74 beds	1	-	-	-	1	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	2	-	-	-	2	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	8	1	1	-	7	-	-	-
Less than 25 beds	2	1	1	-	1	-	-	-
25 to 49 beds	3	-	-	-	3	-	-	-
50 to 74 beds	1	-	-	-	1	-	-	-
100 to 149 beds	2	-	-	-	2	-	-	-
Unit of Hospital								
Total	3	3	-	3	-	-	-	-
Less than 25 beds	3	3	-	3	-	-	-	-
Unit of Domiciliary Institution								
Total	1	1	1	-	-	-	-	-
25 to 49 beds	1	1	1	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
NEW JERSEY								
All Facilities								
Total	80	19	13	6	55	6	-	6
Less than 25 beds	6	4	3	1	1	1	-	1
25 to 49 beds	18	8	5	3	9	1	-	1
50 to 74 beds	15	3	2	1	12	-	-	-
75 to 99 beds	14	2	2	-	10	2	-	2
100 to 149	25	2	1	1	21	2	-	2
150 to 199 beds	1	-	-	-	1	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
Skilled Nursing Facility ¹								
Total	66	11	8	3	53	2	-	2
Less than 25 beds	3	1	1	-	1	1	-	1
25 to 49 beds	15	6	4	2	8	1	-	1
50 to 74 beds	13	1	1	-	12	-	-	-
75 to 99 beds	12	2	2	-	10	-	-	-
100 to 149 beds	22	1	-	1	21	-	-	-
150 to 199 beds	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	6	2	1	1	-	4	-	4
25 to 49 beds	2	2	1	1	-	-	-	-
75 to 99 beds	2	-	-	-	-	2	-	2
100 to 149 beds	2	-	-	-	-	2	-	2
Unit of Domiciliary Institution								
Total	5	5	3	2	-	-	-	-
Less than 25 beds	2	2	1	1	-	-	-	-
50 to 74 beds	2	2	1	1	-	-	-	-
100 to 149 beds	1	1	1	-	-	-	-	-
Other								
Total	3	1	1	-	2	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-
25 to 49 beds	1	-	-	-	1	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
NEW MEXICO								
All Facilities								
Total	21	7	4	3	11	3	2	1
Less than 25 beds	4	2	1	1	2	-	-	-
25 to 49 beds	5	1	1	-	3	1	-	1
50 to 74 beds	7	3	2	1	4	-	-	-
75 to 99 beds	2	-	-	-	2	-	-	-
100 to 149 beds	2	1	-	1	-	1	1	-
150 to 199 beds	1	-	-	-	-	1	1	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	16	3	1	2	11	2	1	1
Less than 25 beds	2	-	-	-	2	-	-	-
25 to 49 beds	4	-	-	-	3	1	-	1
50 to 74 beds	6	2	1	1	4	-	-	-
75 to 99 beds	2	-	-	-	2	-	-	-
100 to 149 beds	2	1	-	1	-	1	1	-
Unit of Hospital								
Total	5	4	3	1	-	1	1	-
Less than 25 beds	2	2	1	1	-	-	-	-
25 to 49 beds	1	1	1	-	-	-	-	-
50 to 74 beds	1	1	1	-	-	-	-	-
150 to 199 beds	1	-	-	-	-	1	1	-
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
NEW YORK								
All Facilities								
Total	256	55	25	30	179	22	1	21
Less than 25 beds	17	10	6	4	7	-	-	-
25 to 49 beds	43	11	5	6	32	-	-	-
50 to 74 beds	42	8	5	3	32	2	-	2
75 to 99 beds	39	7	2	5	29	3	1	2
100 to 149 beds	57	10	4	6	39	8	-	8
150 to 199 beds	30	5	2	3	23	2	-	2
200 beds or more	28	4	1	3	17	7	-	7
Skilled Nursing Facility ¹								
Total	207	22	13	9	177	8	-	8
Less than 25 beds	11	4	3	1	7	-	-	-
25 to 49 beds	33	1	1	-	32	-	-	-
50 to 74 beds	37	4	3	1	32	1	-	1
75 to 99 beds	34	4	2	2	29	1	-	1
100 to 149 beds	45	4	2	2	38	3	-	3
150 to 199 beds	27	2	1	1	23	2	-	2
200 beds or more	20	3	1	2	16	1	-	1
Unit of Hospital								
Total	22	14	3	11	2	6	-	6
Less than 25 beds	4	4	1	3	-	-	-	-
25 to 49 beds	6	6	1	5	-	-	-	-
50 to 74 beds	2	1	-	1	-	1	-	1
75 to 99 beds	1	1	-	1	-	-	-	-
100 to 149 beds	5	2	1	1	1	2	-	2
200 beds or more	4	-	-	-	1	3	-	3
Unit of Domiciliary Institution								
Total	25	17	8	9	-	8	1	7
Less than 25 beds	1	1	1	-	-	-	-	-
25 to 49 beds	4	4	3	1	-	-	-	-
50 to 74 beds	2	2	2	-	-	-	-	-
75 to 99 beds	4	2	-	2	-	2	1	1
100 to 149 beds	7	4	1	3	-	3	-	3
150 to 199 beds	3	3	1	2	-	-	-	-
200 beds or more	4	1	-	1	-	3	-	3
Other								
Total	2	2	1	1	-	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-
50 to 74 beds	1	1	-	1	-	-	-	-
NORTH CAROLINA								
All Facilities								
Total	47	14	5	9	33	-	-	-
Less than 25 beds	6	3	1	2	3	-	-	-
25 to 49 beds	9	6	3	3	3	-	-	-
50 to 74 beds	14	3	-	3	11	-	-	-
75 to 99 beds	10	1	-	1	9	-	-	-
100 to 149 beds	6	-	-	-	6	-	-	-
150 to 199 beds	1	-	-	-	1	-	-	-
200 beds or more	1	1	1	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	37	5	3	2	32	-	-	-
Less than 25 beds	3	-	-	-	3	-	-	-
25 to 49 beds	5	2	2	-	3	-	-	-
50 to 74 beds	12	1	-	1	11	-	-	-
75 to 99 beds	9	1	-	1	8	-	-	-
100 to 149 beds	6	-	-	-	6	-	-	-
150 to 199 beds	1	-	-	-	1	-	-	-
200 beds or more	1	1	1	-	-	-	-	-
Unit or Hospital								
Total	7	6	1	5	1	-	-	-
Less than 25 beds	3	3	1	2	-	-	-	-
25 to 49 beds	2	2	-	2	-	-	-	-
50 to 74 beds	1	1	-	1	-	-	-	-
75 to 99 beds	1	-	-	-	1	-	-	-
Unit of Domiciliary Institution								
Total	3	3	1	2	-	-	-	-
25 to 49 beds	2	2	1	1	-	-	-	-
50 to 74 beds	1	1	-	1	-	-	-	-
75 to 99 beds	1	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
NORTH CAROLINA—Con.								
Other								
Total	-	-	-	-	-	-	-	-
NORTH DAKOTA								
All Facilities								
Total	27	23	20	3	3	1	-	1
Less than 25 beds	7	6	6	-	-	1	-	-
25 to 49 beds	10	10	9	1	-	-	-	-
50 to 74 beds	4	2	1	1	2	-	-	-
75 to 99 beds	5	5	4	1	-	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	18	15	13	2	3	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-
25 to 49 beds	8	8	8	-	-	-	-	-
50 to 74 beds	4	2	1	1	2	-	-	-
75 to 99 beds	4	4	3	1	-	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	6	5	5	-	-	1	-	1
Less than 25 beds	6	5	5	-	-	1	-	1
Unit of Domiciliary Institution								
Total	3	3	2	1	-	-	-	-
25 to 49 beds	2	2	1	1	-	-	-	-
75 to 99 beds	1	1	1	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
OHIO								
All Facilities								
Total	182	41	18	23	132	9	-	9
Less than 25 beds	8	4	2	2	3	1	-	1
25 to 49 beds	49	12	5	7	35	2	-	2
50 to 74 beds	52	9	4	5	42	1	-	1
75 to 99 beds	36	8	3	5	25	3	-	3
100 to 149 beds	25	3	3	-	21	1	-	1
150 to 199 beds	8	3	1	2	5	-	-	-
200 beds or more	4	2	-	2	1	1	-	1
Skilled Nursing Facility ¹								
Total	157	24	7	17	129	4	-	4
Less than 25 beds	4	-	-	-	3	1	-	1
25 to 49 beds	42	7	3	4	34	1	-	1
50 to 74 beds	46	5	1	4	41	-	-	-
75 to 99 beds	30	6	1	5	24	-	-	-
100 to 149 beds	23	1	1	-	21	1	-	1
150 to 199 beds	8	3	1	2	5	-	-	-
200 beds or more	4	2	-	2	1	1	-	1
Unit of Hospital								
Total	15	8	2	6	2	5	-	5
Less than 25 beds	2	2	-	2	-	-	-	-
25 to 49 beds	6	4	1	3	1	1	-	1
50 to 74 beds	2	1	-	1	-	1	-	1
75 to 99 beds	4	-	-	-	1	3	-	3
100 to 149 beds	1	1	1	-	-	-	-	-
Unit of Domiciliary Institution								
Total	9	8	8	-	1	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-
25 to 49 beds	1	1	1	-	-	-	-	-
50 to 74 beds	4	3	3	-	1	-	-	-
75 to 99 beds	2	2	2	-	-	-	-	-
100 to 149 beds	1	1	1	-	-	-	-	-
Other								
Total	1	1	1	-	-	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
OKLAHOMA								
All Facilities								
Total	39	12	4	8	21	6	2	4
Less than 25 beds	18	9	2	7	6	3	1	2
25 to 49 beds	11	1	-	1	8	2	1	1
50 to 74 beds	6	2	2	-	3	1	-	1
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	3	-	-	-	3	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	24	5	2	3	17	2	1	1
Less than 25 beds	8	3	1	2	5	-	-	-
25 to 49 beds	8	1	-	1	6	1	1	-
50 to 74 beds	5	1	1	-	3	1	-	1
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	2	-	-	-	2	-	-	-
Unit of Hospital								
Total	9	5	1	4	-	4	1	3
Less than 25 beds	7	4	-	4	-	3	1	2
25 to 49 beds	1	-	-	-	-	1	-	1
50 to 74 beds	1	1	1	-	-	-	-	-
Unit of Domiciliary Institution								
Total	4	2	1	1	2	-	-	-
Less than 25 beds	2	2	1	1	-	-	-	-
25 to 49 beds	2	-	-	-	2	-	-	-
Other								
Total	2	-	-	-	2	-	-	-
Less than 25 beds	1	-	-	-	1	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
OREGON								
All Facilities								
Total	89	20	13	7	57	12	-	12
Less than 25 beds	25	7	4	3	11	7	-	7
25 to 49 beds	17	3	2	1	12	2	-	2
50 to 74 beds	20	5	4	1	14	1	-	1
75 to 99 beds	20	4	2	2	15	1	-	1
100 to 149 beds	5	-	-	-	5	-	-	-
150 to 199 beds	2	1	1	-	-	1	-	1
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	67	10	7	3	53	4	-	4
Less than 25 beds	10	-	-	-	9	1	-	1
25 to 49 beds	12	1	1	-	10	1	-	1
50 to 74 beds	18	4	3	1	14	-	-	-
75 to 99 beds	20	4	2	2	15	1	-	1
100 to 149 beds	5	-	-	-	5	-	-	-
150 to 199 beds	2	1	1	-	-	1	-	1
Unit of Hospital								
Total	19	9	5	4	3	7	-	7
Less than 25 beds	14	6	3	3	2	6	-	6
25 to 49 beds	4	2	1	1	1	1	-	1
50 to 74 beds	1	1	1	-	-	-	-	-
Unit of Domiciliary Institution								
Total	1	-	-	-	-	1	-	1
50 to 74 beds	1	-	-	-	-	1	-	1
Other								
Total	2	1	1	-	1	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-
25 to 49 beds	1	-	-	-	1	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
PENNSYLVANIA								
All Facilities								
Total	228	75	44	31	142	11	-	11
Less than 25 beds	36	19	10	9	17	-	-	-
25 to 49 beds	64	23	14	9	41	-	-	-
50 to 74 beds	60	22	13	9	38	-	-	-
75 to 99 beds	20	3	2	1	16	1	-	1
100 to 149 beds	32	5	4	1	26	1	-	1
150 to 199 beds	6	1	1	-	4	1	-	1
200 beds or more	10	2	-	2	-	8	-	8
Skilled Nursing Facility ¹								
Total	173	29	21	8	139	5	-	5
Less than 25 beds	17	2	1	1	15	-	-	-
25 to 49 beds	49	9	7	2	40	-	-	-
50 to 74 beds	48	10	8	2	38	-	-	-
75 to 99 beds	17	1	1	-	16	-	-	-
100 to 149 beds	31	4	3	1	26	1	-	1
150 to 199 beds	5	1	1	-	4	-	-	-
200 beds or more	6	2	-	2	-	4	-	4
Unit of Hospital								
Total	22	19	2	17	3	-	-	-
Less than 25 beds	9	7	1	6	2	-	-	-
25 to 49 beds	8	7	-	7	1	-	-	-
50 to 74 beds	5	5	1	4	-	-	-	-
Unit of Domiciliary Institution								
Total	32	26	20	6	-	6	-	6
Less than 25 beds	9	9	7	2	-	-	-	-
25 to 49 beds	7	7	7	-	-	-	-	-
50 to 74 beds	7	7	4	3	-	-	-	-
75 to 99 beds	3	2	1	1	-	1	-	1
100 to 149 beds	1	1	1	-	-	-	-	-
150 to 199 beds	1	-	-	-	-	1	-	1
200 beds or more	4	-	-	-	-	4	-	4
Other								
Total	1	1	1	-	-	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-
RHODE ISLAND								
All Facilities								
Total	22	4	1	3	17	1	1	-
Less than 25 beds	4	-	-	-	3	1	1	-
25 to 49 beds	6	-	-	-	6	-	-	-
50 to 74 beds	10	3	1	2	7	-	-	-
75 to 99 beds	2	1	-	1	1	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	19	3	1	2	16	-	-	-
Less than 25 beds	2	-	-	-	2	-	-	-
25 to 49 beds	6	-	-	-	6	-	-	-
50 to 74 beds	10	3	1	2	7	-	-	-
75 to 99 beds	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	2	-	-	-	1	1	1	-
Less than 25 beds	2	-	-	-	1	1	1	-
Unit of Domiciliary Institution								
Total	1	1	-	1	-	-	-	-
75 to 99 beds	1	1	-	1	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
SOUTH CAROLINA								
All Facilities								
Total	53	7	1	6	41	5	-	5
Less than 25 beds	1	-	-	-	1	-	-	-
25 to 49 beds	20	3	1	2	14	3	-	3
50 to 74 beds	12	1	-	1	10	1	-	1
75 to 99 beds	13	3	-	3	10	-	-	-
100 to 149 beds	6	-	-	-	5	1	-	1
150 to 199 beds	1	-	-	-	1	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	51	6	1	5	41	4	-	4
Less than 25 beds	1	-	-	-	1	-	-	-
25 to 49 beds	19	2	1	1	14	3	-	3
50 to 74 beds	11	1	-	1	10	-	-	-
75 to 99 beds	13	3	-	3	10	-	-	-
100 to 149 beds	6	-	-	-	5	1	-	1
150 to 199 beds	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	2	1	-	1	-	1	-	1
25 to 49 beds	1	1	-	1	-	-	-	-
50 to 74 beds	1	-	-	-	-	1	-	1
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
SOUTH DAKOTA								
All Facilities								
Total	20	13	5	8	7	-	-	-
Less than 25 beds	4	4	3	1	-	-	-	-
25 to 49 beds	5	4	1	3	1	-	-	-
50 to 74 beds	9	4	1	3	5	-	-	-
75 to 99 beds	2	1	-	1	1	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	14	8	3	5	6	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-
25 to 49 beds	4	3	1	2	1	-	-	-
50 to 74 beds	7	3	1	2	4	-	-	-
75 to 99 beds	2	1	-	1	1	-	-	-
Unit of Hospital								
Total	5	5	2	3	-	-	-	-
Less than 25 beds	3	3	2	1	-	-	-	-
25 to 49 beds	1	1	-	1	-	-	-	-
50 to 74 beds	1	1	-	1	-	-	-	-
Unit of Domiciliary Institution								
Total	1	-	-	-	1	-	-	-
50 to 74 beds	1	-	-	-	1	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
TENNESSEE								
All Facilities								
Total	57	12	7	5	32	13	-	13
Less than 25 beds	4	2	1	1	2	-	-	-
25 to 49 beds	19	6	5	1	7	6	-	6
50 to 74 beds	15	2	1	1	8	5	-	5
75 to 99 beds	10	1	-	1	8	1	-	1
100 to 149 beds	5	1	-	1	4	-	-	-
150 to 199 beds	2	-	-	-	2	-	-	-
200 beds or more	2	-	-	-	1	1	-	1

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
TENNESSEE—Con.								
Skilled Nursing Facility ¹								
Total	44	8	4	4	28	8	-	8
Less than 25 beds	3	1	1	-	2	-	-	-
25 to 49 beds	15	4	3	1	6	5	-	5
50 to 74 beds	11	1	-	1	7	3	-	3
75 to 99 beds	8	1	-	1	7	-	-	-
100 to 149 beds	4	1	-	1	3	-	-	-
150 to 199 beds	2	-	-	-	2	-	-	-
200 beds or more	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	11	3	2	1	3	5	-	5
Less than 25 beds	1	1	-	1	-	-	-	-
25 to 49 beds	3	1	1	-	1	1	-	1
50 to 74 beds	4	1	1	-	1	2	-	2
75 to 99 beds	2	-	-	-	1	1	-	1
200 beds or more	1	-	-	-	-	1	-	1
Unit of Domiciliary Institution								
Total	2	1	1	-	1	-	-	-
25 to 49 beds	1	1	1	-	-	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
TEXAS								
All Facilities								
Total	299	47	30	17	242	10	1	9
Less than 25 beds	38	15	9	6	20	3	-	3
25 to 49 beds	64	10	7	3	52	2	-	2
50 to 74 beds	104	5	5	-	96	3	1	2
75 to 99 beds	36	8	4	4	27	1	-	1
100 to 149 beds	42	3	1	2	39	-	-	-
150 to 199 beds	8	3	2	1	5	-	-	-
200 beds or more	7	3	2	1	3	1	-	1
Skilled Nursing Facility ¹								
Total	255	28	17	11	221	6	1	5
Less than 25 beds	16	4	1	3	11	1	-	1
25 to 49 beds	57	6	4	2	50	1	-	1
50 to 74 beds	97	4	4	-	90	3	1	2
75 to 99 beds	33	6	4	2	26	1	-	1
100 to 149 beds	40	3	1	2	37	-	-	-
150 to 199 beds	6	2	1	1	4	-	-	-
200 beds or more	6	3	2	1	3	-	-	-
Unit of Hospital								
Total	33	13	7	6	17	3	-	3
Less than 25 beds	19	8	5	3	9	2	-	2
25 to 49 beds	4	2	1	1	2	-	-	-
50 to 74 beds	5	1	1	-	4	-	-	-
75 to 99 beds	2	2	-	2	-	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
150 to 199 beds	1	-	-	-	1	-	-	-
200 beds or more	1	-	-	-	-	1	-	1
Unit of Domiciliary Institution								
Total	8	5	5	-	2	1	-	1
Less than 25 beds	2	2	2	-	-	-	-	-
25 to 49 beds	3	2	2	-	-	1	-	1
50 to 74 beds	2	-	-	-	2	-	-	-
150 to 199 beds	1	1	1	-	-	-	-	-
Other								
Total	3	1	1	-	2	-	-	-
Less than 25 beds	1	1	1	-	-	-	-	-
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
UTAH								
All Facilities								
Total	29	8	3	5	15	6	-	6
Less than 25 beds	7	3	1	2	2	2	-	2
25 to 49 beds	7	2	1	1	4	1	-	1
50 to 74 beds	8	-	-	-	5	3	-	3
75 to 99 beds	3	2	1	1	1	-	-	-
100 to 149 beds	4	1	-	1	3	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	21	3	1	2	15	3	-	3
Less than 25 beds	2	-	-	-	2	-	-	-
25 to 49 beds	5	1	-	1	4	-	-	-
50 to 74 beds	8	-	-	-	5	3	-	3
75 to 99 beds	2	1	1	-	1	-	-	-
100 to 149 beds	4	1	-	1	3	-	-	-
Unit of Hospital								
Total	8	5	2	3	-	3	-	3
Less than 25 beds	5	3	1	2	-	2	-	2
25 to 49 beds	2	1	1	-	-	1	-	1
75 to 99 beds	1	1	-	1	-	-	-	-
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
VERMONT								
All Facilities								
Total	11	3	1	2	7	1	-	1
Less than 25 beds	3	1	-	1	2	-	-	-
25 to 49 beds	4	2	1	1	1	1	-	1
50 to 74 beds	3	-	-	-	3	-	-	-
75 to 99 beds	1	-	-	-	1	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	11	3	1	2	7	1	-	1
Less than 25 beds	3	1	-	1	2	-	-	-
25 to 49 beds	4	2	1	1	1	1	-	1
50 to 74 beds	3	-	-	-	3	-	-	-
75 to 99 beds	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	-	-	-	-	-	-	-	-
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
VIRGINIA								
All Facilities								
Total	52	13	3	10	38	1	-	1
Less than 25 beds	3	3	-	3	-	-	-	-
25 to 49 beds	15	5	3	2	10	-	-	-
50 to 74 beds	13	2	-	2	11	-	-	-
75 to 99 beds	9	1	-	1	8	-	-	-
100 to 149 beds	8	1	-	1	7	-	-	-
150 to 199 beds	3	1	-	1	2	-	-	-
200 beds or more	1	-	-	-	-	1	-	1
Skilled Nursing Facility ¹								
Total	48	9	3	6	38	1	-	1
Less than 25 beds	1	1	-	1	-	-	-	-
25 to 49 beds	14	4	3	1	10	-	-	-
50 to 74 beds	12	1	-	1	11	-	-	-
75 to 99 beds	9	1	-	1	8	-	-	-
100 to 149 beds	8	1	-	1	7	-	-	-
150 to 199 beds	3	1	-	1	2	-	-	-
200 beds or more	1	-	-	-	-	1	-	1

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
VIRGINIA—Con.								
Unit of Hospital								
Total	4	4	-	4	-	-	-	-
Less than 25 beds	2	2	-	2	-	-	-	-
25 to 49 beds	1	1	-	1	-	-	-	-
50 to 74 beds	1	1	-	1	-	-	-	-
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
WASHINGTON								
All Facilities								
Total	176	42	31	11	120	14	-	14
Less than 25 beds	59	20	16	4	26	13	-	13
25 to 49 beds	44	11	8	3	32	1	-	1
50 to 74 beds	31	9	5	4	22	-	-	-
75 to 99 beds	27	1	1	-	26	-	-	-
100 to 149 beds	10	1	1	-	9	-	-	-
150 to 199 beds	5	-	-	-	5	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	138	20	17	3	116	2	-	2
Less than 25 beds	34	9	9	-	23	2	-	2
25 to 49 beds	37	6	6	-	31	-	-	-
50 to 74 beds	26	4	1	3	22	-	-	-
75 to 99 beds	27	1	1	-	26	-	-	-
100 to 149 beds	9	-	-	-	9	-	-	-
150 to 199 beds	5	-	-	-	5	-	-	-
Unit of Hospital								
Total	30	17	9	8	1	12	-	12
Less than 25 beds	20	8	4	4	1	11	-	11
25 to 49 beds	6	5	2	3	-	1	-	1
50 to 74 beds	3	3	2	1	-	-	-	-
100 to 149 beds	1	1	1	-	-	-	-	-
Unit of Domiciliary Institution								
Total	4	3	3	-	1	-	-	-
Less than 25 beds	3	2	2	-	1	-	-	-
50 to 74 beds	1	1	1	-	-	-	-	-
Other								
Total	4	2	2	-	2	-	-	-
Less than 25 beds	2	1	1	-	1	-	-	-
25 to 49 beds	1	-	-	-	1	-	-	-
50 to 74 beds	1	1	1	-	-	-	-	-
WEST VIRGINIA								
All Facilities								
Total	28	8	4	4	17	3	2	1
Less than 25 beds	8	2	1	1	6	-	-	-
25 to 49 beds	10	2	2	-	7	1	1	-
50 to 74 beds	5	3	1	2	1	1	1	-
75 to 99 beds	4	1	-	1	2	1	-	1
100 to 149 beds	1	-	-	-	1	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	20	3	1	2	16	1	-	1
Less than 25 beds	6	1	-	1	5	-	-	-
25 to 49 beds	8	1	1	-	7	-	-	-
50 to 74 beds	1	-	-	-	1	-	-	-
75 to 99 beds	4	1	-	1	2	1	-	1
100 to 149 beds	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	5	4	2	2	-	1	1	-
Less than 25 beds	1	1	1	-	-	-	-	-
25 to 49 beds	2	1	1	-	-	1	1	-
50 to 74 beds	2	2	-	2	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
WEST VIRGINIA—Con.								
Unit of Domiciliary Institution								
Total	2	1	1	-	1	-	-	-
Less than 25 beds	1	-	-	-	1	-	-	-
50 to 74 beds	1	1	1	-	-	-	-	-
Other								
Total	1	-	-	-	-	1	1	-
50 to 74 beds	1	-	-	-	-	1	1	-
WISCONSIN								
All Facilities								
Total	193	81	53	28	67	45	4	41
Less than 25 beds	35	16	11	5	17	2	-	2
25 to 49 beds	54	32	19	13	10	12	1	11
50 to 74 beds	45	18	10	8	17	10	1	9
75 to 99 beds	23	7	5	2	10	6	1	5
100 to 149 beds	20	6	6	-	9	5	-	5
150 to 199 beds	12	1	1	-	4	7	-	7
200 beds or more	4	1	1	-	-	3	1	2
Skilled Nursing Facility ¹								
Total	151	50	35	15	66	35	2	33
Less than 25 beds	26	8	5	3	16	2	-	2
25 to 49 beds	36	20	12	8	10	6	-	6
50 to 74 beds	35	9	7	2	17	9	1	8
75 to 99 beds	22	7	5	2	10	5	-	5
100 to 149 beds	16	4	4	-	9	3	-	3
150 to 199 beds	12	1	1	-	4	7	-	7
200 beds or more	4	1	1	-	-	3	1	2
Unit of Hospital								
Total	36	27	15	12	1	8	-	8
Less than 25 beds	8	7	5	2	1	-	-	-
25 to 49 beds	15	10	6	4	-	5	-	5
50 to 74 beds	9	8	2	6	-	1	-	1
100 to 149 beds	4	2	2	-	-	2	-	2
Unit of Domiciliary Institution								
Total	4	3	2	1	-	1	1	-
25 to 49 beds	2	2	1	1	-	-	-	-
50 to 74 beds	1	1	1	-	-	-	-	-
75 to 99 beds	1	-	-	-	-	1	1	-
Other								
Total	2	1	1	-	-	1	1	-
Less than 25 beds	1	1	1	-	-	-	-	-
25 to 49 beds	1	-	-	-	-	1	1	-
WYOMING								
All Facilities								
Total	10	1	1	-	7	2	-	2
Less than 25 beds	7	1	1	-	4	2	-	2
25 to 49 beds	1	-	-	-	1	-	-	-
50 to 74 beds	1	-	-	-	1	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	7	1	1	-	6	-	-	-
Less than 25 beds	4	1	1	-	3	-	-	-
25 to 49 beds	1	-	-	-	1	-	-	-
50 to 74 beds	1	-	-	-	1	-	-	-
100 to 149 beds	1	-	-	-	1	-	-	-
Unit of Hospital								
Total	3	-	-	-	1	2	-	2
Less than 25 beds	3	-	-	-	1	2	-	2
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
OUTLYING AREAS								
Guam								
All Facilities								
Total	1	-	-	-	-	1	1	-
Less than 25 beds	1	-	-	-	-	1	1	-
25 to 49 beds	-	-	-	-	-	-	-	-
50 to 74 beds	-	-	-	-	-	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	-	-	-	-	-	-	-	-
Unit of Hospital								
Total	1	-	-	-	-	1	1	-
Less than 25 beds	1	-	-	-	-	1	1	-
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
Puerto Rico								
All Facilities								
Total	6	3	1	2	-	3	1	2
Less than 25 beds	-	-	-	-	-	-	-	-
25 to 49 beds	3	2	1	1	-	1	-	1
50 to 74 beds	1	1	-	1	-	-	-	-
75 to 99 beds	1	-	-	-	-	1	-	1
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	1	-	-	-	-	1	1	-
Skilled Nursing Facility ¹								
Total	1	-	-	-	-	1	-	1
75 to 99 beds	1	-	-	-	-	1	-	1
Unit of Hospital								
Total	5	3	1	2	-	2	1	1
25 to 49 beds	3	2	1	1	-	1	-	1
50 to 74 beds	1	1	-	1	-	-	-	-
200 beds or more	1	-	-	-	-	1	1	-
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.3 NUMBER OF EXTENDED CARE FACILITIES BY CONTROL, TYPE OF FACILITY AND BED SIZE, REGION, DIVISION, AND STATE—Con.

[See NOTES preceding General Tables]

Region, division, State, type of facility, and bed size	All facilities	Voluntary facilities			Proprietary facilities	Government facilities		
		Total	Church	Other		Total	State	Local
OUTLYING AREAS—Con.								
Virgin Islands								
All Facilities								
Total	-	-	-	-	-	-	-	-
Less than 25 beds	-	-	-	-	-	-	-	-
25 to 49 beds	-	-	-	-	-	-	-	-
50 to 74 beds	-	-	-	-	-	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	-	-	-	-	-	-	-	-
Unit of Hospital								
Total	-	-	-	-	-	-	-	-
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-
OTHER OUTLYING AREAS								
All Facilities								
Total	-	-	-	-	-	-	-	-
Less than 25 beds	-	-	-	-	-	-	-	-
25 to 49 beds	-	-	-	-	-	-	-	-
50 to 74 beds	-	-	-	-	-	-	-	-
75 to 99 beds	-	-	-	-	-	-	-	-
100 to 149 beds	-	-	-	-	-	-	-	-
150 to 199 beds	-	-	-	-	-	-	-	-
200 beds or more	-	-	-	-	-	-	-	-
Skilled Nursing Facility ¹								
Total	-	-	-	-	-	-	-	-
Unit of Hospital								
Total	-	-	-	-	-	-	-	-
Unit of Domiciliary Institution								
Total	-	-	-	-	-	-	-	-
Other								
Total	-	-	-	-	-	-	-	-

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.4 FACILITIES AND SERVICES BY TYPE OF FACILITY, BED SIZE, AND NUMBER OF FACILITIES REPORTING EACH SERVICE

[See NOTES preceding General Tables]

Type of facility and services	All facilities	Percent of total	Bed size						
			Less than 25	25 to 49	50 to 74	75 to 99	100 to 149	150 to 199	200 or more
ALL FACILITIES									
Total	4 886	100.0	651	1 250	1 285	770	647	170	113
Number reporting:									
Nursing.....	4 886	100.0	651	1 250	1 285	770	647	170	113
Physical therapy	3 726	76.3	416	896	977	639	540	153	105
Occupational therapy	2 355	48.2	198	540	594	433	383	119	88
Speech therapy	1 530	31.3	113	354	369	299	242	91	62
Social services.....	3 054	62.5	282	745	826	517	448	140	96
Recreational activities.....	4 305	88.1	465	1 096	1 158	714	599	164	109
Pharmacy.....	2 653	54.3	351	642	662	419	358	130	91
Clinical laboratory	2 550	52.2	378	628	607	398	331	126	82
X-ray, diagnostic	2 451	50.2	379	602	587	377	304	121	81
Examination and treatment room.....	3 463	70.9	440	802	899	562	504	148	108
Dentistry.....	2 456	50.3	265	606	619	403	343	128	90
Podiatry.....	1 876	38.4	157	435	442	341	302	117	82
Ophthalmology.....	1 378	28.2	130	332	332	222	208	83	71
Other.....	392	8.0	44	75	92	61	61	26	33
SKILLED NURSING FACILITY ¹									
Total	3 963	100.0	322	983	1 124	716	583	150	85
Number reporting:									
Nursing.....	3 963	100.0	322	983	1 124	716	583	150	85
Physical therapy	3 031	76.5	213	692	846	586	480	134	80
Occupational therapy	1 974	49.8	133	425	515	395	335	103	68
Speech therapy	1 318	33.3	66	298	328	280	219	80	47
Social services.....	2 556	64.5	168	598	720	477	395	124	74
Recreational activities.....	3 612	91.1	272	882	1 024	665	540	147	82
Pharmacy.....	1 993	50.3	141	453	543	376	303	112	65
Clinical laboratory	1 827	46.1	113	429	484	353	281	109	58
X-ray, diagnostic	1 735	43.8	112	404	470	335	253	104	57
Examination and treatment room.....	2 669	67.3	176	572	750	513	446	130	82
Dentistry.....	1 989	50.2	143	470	536	365	297	112	66
Podiatry.....	1 609	40.6	109	360	394	312	270	102	62
Ophthalmology.....	1 091	27.5	67	252	275	198	179	71	49
Other.....	281	7.1	17	45	72	52	49	22	24
UNIT OF HOSPITAL									
Total	677	100.0	264	196	115	34	42	10	16
Number reporting:									
Nursing.....	677	100.0	264	196	115	34	42	10	16
Physical therapy	513	75.8	166	153	97	34	39	10	14
Occupational therapy	252	37.2	43	72	55	27	34	8	13
Speech therapy	149	22.0	31	36	31	15	19	9	8
Social services.....	326	48.2	79	97	70	24	35	8	13
Recreational activities.....	480	70.9	146	149	93	30	39	8	15
Pharmacy.....	527	77.8	187	153	96	30	38	9	14
Clinical laboratory	605	89.4	243	168	102	31	38	9	14
X-ray, diagnostic	605	89.4	248	167	100	30	38	9	13
Examination and treatment room.....	612	90.4	232	176	110	31	38	10	15
Dentistry.....	331	48.9	100	96	61	23	32	7	12
Podiatry.....	141	20.8	26	37	25	18	20	6	9
Ophthalmology.....	192	28.4	49	52	40	15	21	4	11
Other.....	76	11.2	24	20	12	7	6	2	5
UNIT OF DOMICILIARY INSTITUTION									
Total	205	100.0	47	61	42	19	16	9	11
Number reporting:									
Nursing.....	205	100.0	47	61	42	19	16	9	11
Physical therapy	161	78.5	34	43	31	18	16	9	10
Occupational therapy	114	55.6	21	37	21	10	10	8	7
Speech therapy	48	23.4	14	14	7	3	1	2	7
Social services.....	155	75.6	33	44	33	15	14	8	8
Recreational activities.....	194	94.6	44	58	38	18	16	9	11
Pharmacy.....	121	59.0	22	32	21	13	13	9	11
Clinical laboratory	106	51.7	21	26	19	14	9	8	9
X-ray, diagnostic	100	48.8	18	26	16	12	10	8	10
Examination and treatment room.....	165	80.5	30	48	36	17	16	8	10
Dentistry.....	124	60.5	21	37	20	14	12	9	11
Podiatry.....	118	57.6	22	33	22	11	11	9	10
Ophthalmology.....	86	42.0	14	23	15	8	8	8	10
Other.....	29	14.1	3	8	6	2	5	2	3

¹ Includes distinct part units of skilled nursing facilities.

Table 3.4.4 FACILITIES AND SERVICES BY TYPE OF FACILITY, BED SIZE, AND NUMBER OF FACILITIES REPORTING EACH SERVICE
—Con.

[See NOTES preceding General Tables]

Type of facility and services	All facilities	Percent of total	Bed-size						
			Less than 25	25 to 49	50 to 74	75 to 99	100 to 149	150 to 199	200 or more
OTHER									
Total	41	100.0	18	10	4	1	6	1	1
Number reporting:									
Nursing.....	41	100.0	18	10	4	1	6	1	1
Physical therapy	21	51.2	3	8	3	1	5	-	1
Occupational therapy ..	15	36.6	1	6	3	1	4	-	-
Speech therapy	15	36.6	2	6	3	1	3	-	-
Social services.....	17	41.5	2	6	3	1	4	-	1
Recreational activities ..	19	46.3	3	7	3	1	4	-	1
Pharmacy.....	12	29.3	1	4	2	-	4	-	1
Clinical laboratory	12	29.3	1	5	2	-	3	-	1
X-ray, diagnostic	11	26.8	1	5	1	-	3	-	1
Examination and treatment room.....	17	41.5	2	6	3	1	4	-	1
Dentistry	12	29.3	1	5	2	1	2	-	1
Podiatry	8	19.5	-	5	1	-	1	-	1
Ophthalmology	9	22.0	-	5	2	1	-	-	1
Other	6	14.6	-	2	2	-	1	-	1

Table 3.4.5 FACILITIES AND SERVICES BY CONTROL, BED SIZE, AND NUMBER OF FACILITIES REPORTING EACH SERVICE

[See NOTES preceding General Tables]

Type of control and services	All facilities	Percent of total	Bed size						
			Less than 25	25 to 49	50 to 74	75 to 99	100 to 149	150 to 199	200 or more
ALL FACILITIES									
Total	4 886	100.0	651	1 250	1 285	770	647	170	113
Number reporting:									
Nursing	4 886	100.0	651	1 250	1 285	770	647	170	113
Physical therapy	3 726	76.3	416	896	977	639	540	153	105
Occupational therapy	2 355	48.2	198	540	594	433	383	119	88
Speech therapy	1 530	31.3	113	354	369	299	242	91	62
Social services	3 054	62.5	282	745	826	517	448	140	96
Recreational activities	4 305	88.1	465	1 096	1 158	714	599	164	109
Pharmacy	2 653	54.3	351	642	662	419	358	130	91
Clinical laboratory	2 550	52.2	378	628	607	398	331	126	82
X-ray, diagnostic	2 451	50.2	379	602	587	377	304	121	81
Examination and treatment room	3 463	70.9	440	802	899	562	504	148	108
Dentistry	2 456	50.3	265	608	619	403	343	128	90
Podiatry	1 876	38.4	157	435	442	341	302	117	82
Ophthalmology	1 378	28.2	130	332	332	222	208	83	71
Other	392	8.0	44	75	92	61	61	26	33
VOLUNTARY FACILITIES									
Total	1 076	100.0	287	333	222	96	78	35	25
Number reporting:									
Nursing	1 076	100.0	287	333	222	96	78	35	25
Physical therapy	810	75.3	177	245	180	79	73	31	25
Occupational therapy	486	45.2	75	157	108	49	52	25	20
Speech therapy	240	22.3	47	71	48	27	22	12	13
Social services	601	55.9	112	177	135	65	59	30	23
Recreational activities	906	84.2	198	295	197	87	72	32	25
Pharmacy	645	59.9	176	187	133	48	54	26	21
Clinical laboratory	651	60.5	194	191	131	48	46	25	16
X-ray, diagnostic	652	60.6	195	194	127	46	46	24	20
Examination and treatment room	885	82.2	224	271	190	78	67	31	24
Dentistry	547	50.8	115	169	111	58	48	27	19
Podiatry	384	35.7	59	110	83	43	42	25	22
Ophthalmology	329	30.6	62	99	72	29	31	20	16
Other	123	11.4	25	32	24	15	9	8	10
PROPRIETARY FACILITIES									
Total	3 352	100.0	267	789	980	631	524	115	46
Number reporting:									
Nursing	3 352	100.0	267	789	980	631	524	115	46
Physical therapy	2 606	77.7	184	574	739	526	432	108	43
Occupational therapy	1 683	50.2	106	344	451	358	307	83	34
Speech therapy	1 199	35.8	60	267	306	258	209	70	29
Social services	2 185	65.2	139	500	637	422	354	96	37
Recreational activities	3 052	91.1	228	703	890	586	487	114	44
Pharmacy	1 687	50.3	115	374	471	337	269	87	34
Clinical laboratory	1 564	46.7	103	351	419	318	254	86	33
X-ray, diagnostic	1 468	43.8	101	326	403	300	228	80	30
Examination and treatment room	2 178	65.0	131	430	637	444	394	97	45
Dentistry	1 663	49.6	116	386	464	315	264	84	34
Podiatry	1 377	41.1	92	314	343	280	241	76	31
Ophthalmology	912	27.2	57	214	233	178	156	50	24
Other	212	6.3	14	35	56	39	46	13	9
STATE AND LOCAL FACILITIES									
Total	458	100.0	97	128	83	43	45	20	42
Number reporting:									
Nursing	458	100.0	97	128	83	43	45	20	42
Physical therapy	310	67.7	55	77	58	34	35	14	37
Occupational therapy	186	40.6	17	39	35	26	24	11	34
Speech therapy	91	19.9	6	16	15	14	11	9	20
Social services	268	58.5	31	68	54	30	35	14	36
Recreational activities	347	75.8	39	98	71	41	40	18	40
Pharmacy	321	70.1	60	81	58	34	35	17	36
Clinical laboratory	335	73.1	81	86	57	32	31	15	33
X-ray, diagnostic	331	72.3	83	82	57	31	30	17	31
Examination and treatment room	400	87.3	85	101	72	40	43	20	39
Dentistry	246	53.7	34	53	44	30	31	17	37
Podiatry	115	25.1	6	11	16	18	19	16	29
Ophthalmology	137	29.9	11	19	27	15	21	13	31
Other	57	12.4	5	8	12	7	6	5	14

Table 3.4.6 NUMBER OF EXTENDED CARE FACILITIES AND RATIOS OF SELECTED STAFF BY TYPE OF FACILITY AND BED SIZE

[See NOTES preceding General Tables]

Type of facility and bed size	Number of facilities	Number of registered professional nurses	Number of licensed practical nurses	Beds per registered professional nurse	Beds per licensed practical nurse	Number of registered professional nurses per ECF	Number of licensed practical nurses per ECF
ALL FACILITIES							
Total	4 886	24 965.4	22 666.0	13.6	15.0	5.1	4.6
Less than 25 beds	651	3 422.6	2 283.8	3.2	4.8	5.3	3.5
25 to 49 beds	1 250	5 287.8	4 390.8	9.1	10.9	4.2	3.5
50 to 74 beds	1 285	5 102.8	4 759.5	15.0	16.1	4.0	3.7
75 to 99 beds	770	3 681.0	3 263.8	18.3	20.7	4.8	4.2
100 to 149 beds	647	4 152.0	3 987.6	17.8	18.6	6.4	6.2
150 to 199 beds	170	1 462.9	1 580.9	19.5	18.1	8.6	9.3
200 beds or more	113	1 856.2	2 399.7	18.1	14.0	16.4	21.2
SKILLED NURSING FACILITY¹							
Total	3 963	16 822.9	16 207.3	17.2	17.9	4.2	4.1
Less than 25 beds	322	1 048.0	843.4	5.8	7.2	3.3	2.6
25 to 49 beds	983	3 120.1	2 824.6	12.2	13.5	3.2	2.9
50 to 74 beds	1 124	3 875.4	3 714.0	17.3	18.0	3.4	3.3
75 to 99 beds	716	3 189.1	2 890.8	19.7	21.7	4.5	4.0
100 to 149 beds	583	3 292.3	3 061.6	20.2	21.7	5.6	5.3
150 to 199 beds	150	1 130.7	1 222.2	22.3	20.6	7.5	8.1
200 beds or more	85	1 167.2	1 650.8	20.5	14.5	13.7	19.4
UNIT OF HOSPITAL							
Total	677	6 763.8	5 169.4	4.9	6.4	10.0	7.6
Less than 25 beds	264	2 200.4	1 270.1	1.8	3.1	8.3	4.8
25 to 49 beds	196	1 825.6	1 312.0	4.0	5.5	9.3	6.7
50 to 74 beds	115	1 014.6	884.2	6.7	7.7	8.8	7.7
75 to 99 beds	34	357.9	313.0	8.2	9.4	10.5	9.2
100 to 149 beds	42	683.6	732.7	7.1	6.7	16.3	17.4
150 to 199 beds	10	264.0	216.2	6.4	7.9	26.4	21.6
200 beds or more	16	417.6	441.1	13.4	12.6	26.1	27.6
UNIT OF DOMICILIARY INSTITUTION							
Total	205	1 194.8	1 156.1	12.0	12.4	5.8	5.6
Less than 25 beds	47	164.9	161.5	4.9	5.0	3.5	3.4
25 to 49 beds	61	254.7	200.2	8.7	11.0	4.2	3.3
50 to 74 beds	42	194.9	149.8	12.8	16.7	4.6	3.6
75 to 99 beds	19	132.0	56.0	12.6	29.7	6.9	2.9
100 to 149 beds	16	130.9	152.4	13.9	11.9	8.2	9.5
150 to 199 beds	9	68.2	142.5	22.2	10.6	7.6	15.8
200 beds or more	11	249.4	293.8	15.4	13.0	22.7	26.7
OTHER²							
Total	41	183.9	133.3	11.8	16.3	4.5	3.3

¹ Includes distinct part units of skilled nursing facilities.² Detail not shown because of potential disclosure of confidential information involving staff size of individual facilities.

Other Data Sources On The Health Insurance For The Aged Program

The *Health Insurance Statistics* series is designed to present current, quick-release data from the Medicare program. Two report series are issued in this format:

The *Health Insurance* (HI) series has included 28 releases since 1967. Issues released prior to 1970 are out of print, but available in many libraries.

The *Current Medicare Survey* (CMS) series, based on data from the continuing Current Medicare Survey, has included 14 releases since 1967. These issues are available in most libraries.

Future releases in the HI and CMS series may be obtained upon request to the Publications Staff, Office of Research and Statistics, Social Security Administration, Room 3643, HEW North Building, 330 Independence Avenue, SW., Washington, D.C. 20201.

The *Social Security Bulletin*, published monthly, presents authoritative articles and analyses of medical care expenditures, prices, and utilization, as well as current operating statistics from the Medicare program. The *Annual Statistical Supplement* to the *Bulletin* includes summary data on trust funds, services, claims, enrollment, average charges, and participating providers of service under Medicare. The *Bulletin*, including the *Supplement*, is available in most libraries and by subscription at \$4 a year from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.

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